CHAPTER 17 FORMS FOR SELF-REPRESENTED LITIGANTS

Rule 17.1 Rules 17.2 to 17.99 Rule 17.100 Use of forms; mandatory for self-represented litigants

Reserved

Family law forms for dissolution of marriage without minor or dependent adult children

Form 101: Petition for Dissolution of Marriage with no Minor

or Dependent Adult Children

Form 102: Petition Cover Sheet for a Dissolution of Marriage

with no Minor or Dependent Adult Children

Form 103: Confidential Information Form Form 104: Original Notice for Personal Service Form 104a: Original Notice for Personal Service

Form 105: Acceptance of Service

Form 106: Directions for Service of Original Notice Form 107: Motion and Affidavit to Serve by Publication

Form 108: Original Notice by Publication

Form 109: Application and Affidavit to Defer Payment of Costs
Form 110: Affidavit of Service of Original Notice and Petition
for Dissolution of Marriage

Form 111: Protected Information Disclosure

Forms 112 to 114: Reserved

Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Form 116: General Answer to a Petition

Forms 117 to 121: Reserved

Form 122: Motion in a Dissolution of Marriage with no Minor

or Dependent Adult Children

Form 123: Response to a Motion

Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children

Form 125: Affidavit of Mailing Notice

Form 126: Notice of Intent to File Written Application for

Default Decree

Form 127: Request for Relief in a Dissolution of Marriage with

no Minor or Dependent Adult Children

Form 128: Settlement Agreement for a Dissolution of Marriage

with no Minor or Dependent Adult Children

Forms 129 to 200: Reserved

Rules 17.101 to 17.199 Rule 17.200 Reserved

Family law forms for dissolution of marriage with dependent children

Form 201: Petition for Dissolution of Marriage with Children Form 202: Petition Cover Sheet for a Dissolution of Marriage

with Children

Form 203: Confidential Information Form Form 204: Original Notice for Personal Service Form 204a: Original Notice for Personal Service

Form 205: Acceptance of Service

Form 206: Directions for Service of Original Notice Form 207: Motion and Affidavit to Serve by Publication

Form 208: Original Notice by Publication

Form 209: Application and Affidavit to Defer Payment of Costs Form 210: Affidavit of Service of Original Notice and Petition

for Dissolution of Marriage Protected Information Disclosure

Form 211: Protected Information Disclosure
Form 212: Joint Statement on Legal Parent
Form 213: Motion to Disestablish Legal Parent

	Form 214:	Reserved
	Form 215:	Answer to Petition for Dissolution of Marriage with
		Children
	Form 216:	General Answer to a Petition for Dissolution of Marriage with Children
	Forms 217 to	· · · · · · · · · · · · · · · · · · ·
	Form 221:	Affidavit for Temporary Custody and Visitation
	Form 222:	Motion in a Dissolution of Marriage with Children
	Form 223:	Response to a Motion
	Form 224:	Financial Affidavit for a Dissolution of Marriage
		with Children
	Form 225:	Affidavit of Mailing Notice
	Form 226:	Notice of Intent to File Written Application for Default Decree
	Form 227:	Request for Relief in a Dissolution of Marriage with Children
	Form 228:	Settlement Agreement for a Dissolution of Marriage with Children
	Form 229:	Agreed Parenting Plan
	Form 230:	Proposed Parenting Plan
		300: Reserved
Rules 17.201 to 17.299	Reserved	500. Reserved
Rule 17.300		difying child support
	Form 301:	Application to Modify Child Support
	Form 302:	Cover Sheet for an Application to Modify Child Support
	Form 303:	Confidential Information Form
	Form 304:	Original Notice for Personal Service
	Form 304a:	Original Notice for Personal Service
	Form 305:	Acceptance of Service
	Form 306:	Directions for Service of Original Notice
		d 308: Reserved
	Form 309:	Application and Affidavit to Defer Payment of Costs
	Form 310:	Affidavit of Service of Original Notice and Application
	Form 311:	to Modify Child Support Protected Information Disclosure
	Forms 312 to	
	Form 315:	Answer to Application to Modify Child Support
	Form 316: Forms 317 to	General Answer to Application to Modify Child Support 321: Reserved
	Form 322:	Motion in a Child Support Modification
	Form 323:	Response to a Motion in a Child Support Modification
	Form 324:	Child Support Modification Financial Statement
	Form 325:	Affidavit of Mailing Notice
	Form 326:	Notice of Intent to File Written Application for Default Decree
	Form 327:	Request for Relief in a Child Support Modification
	Form 328:	Settlement Agreement on an Application to Modify Child
		Support
D 1 17 201 / 17 200	Forms 329 to	400: Reserved
Rules 17.301 to 17.399	Reserved	and visitation forms for a distriction for the first forms of the firs
Rule 17.400		and visitation forms for unmarried parents Potition for Custody and Visitation (Parents not Married)
	Form 401:	Petition for Custody and Visitation (Parents not Married) Petition Cover Shoot for Custody and Visitation
	Form 402:	Petition Cover Sheet for Custody and Visitation
	Form 404:	Confidential Information Form
	Form 404:	Original Notice for Personal Service
	Form 404a: Form 405:	Original Notice for Personal Service
	Form 405: Form 406:	Acceptance of Service Directions for Service of Original Notice
	1 01111 400.	Directions for service of original routee

Form 407:	Motion and Affidavit to Serve by Publication
Form 408:	Original Notice by Publication
Form 408a:	Proof of Service by Publication
Form 409:	Application and Affidavit to Defer Payment of Costs
Form 410:	Affidavit of Service of Original Notice and Petition for
	Custody and Visitation
Form 411:	Protected Information Disclosure
Form 412:	Joint Statement to Disestablish Legal Parent
Form 413:	Motion to Disestablish Legal Parent
Form 414:	Reserved
Form 415:	Answer to Petition for Custody and Visitation
Form 416:	General Answer to a Petition for Custody and Visitation
Forms 417 to	420: Reserved
Form 421:	Affidavit for Temporary Custody and Visitation
Form 422:	Motion in a Custody and Visitation Case
Form 423:	Response to a Motion in a Custody and Visitation Case
Form 424:	Custody and Visitation Financial Statement
Form 425:	Affidavit of Mailing Notice
Form 426:	Notice of Intent to File Written Application for Default
	Decree
Form 427:	Request for Relief in a Custody and Visitation Case
Form 428:	Settlement Agreement for Custody and Visitation
Form 429:	Agreed Parenting Plan
Form 430:	Proposed Parenting Plan
Forms 431 to	500: Reserved
- 1	

Rules 17.401 to 17.499

Reserved

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CHAPTER 17 FORMS FOR SELF-REPRESENTED LITIGANTS

Rule 17.1 Use of forms; mandatory for self-represented litigants. An individual who is not represented by an attorney in a legal proceeding covered under this chapter must use forms contained in this chapter. An attorney may use these forms but is not required to do so. [Court Order May 16, 2007; December 19, 2013]

Rules 17.2 to 17.99 Reserved.

Rule 17.100 Family law forms for dissolution of marriage without minor or dependent adult children. The following forms are for use in dissolution of marriage (divorce) actions without children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and still need support. These forms cannot be used if a spouse of the marriage is pregnant.

ise of the marriage is	pregnant.
Form 101:	Petition for Dissolution of Marriage with no Minor or Dependent Adult Children
Form 102:	Petition Cover Sheet for a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 103:	Confidential Information Form
Form 104:	Original Notice for Personal Service
Form 104a:	Original Notice for Personal Service
Form 105:	Acceptance of Service
Form 106:	Directions for Service of Original Notice
Form 107:	Motion and Affidavit to Serve by Publication
Form 108:	Original Notice by Publication
Form 109:	Application and Affidavit to Defer Payment of Costs
Form 110:	Affidavit of Service of Original Notice and Petition for Dissolution of Marriage
Form 111:	Protected Information Disclosure
Forms 112 to 114:	Reserved
Form 115:	Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children
Form 116:	General Answer to a Petition
Forms 117 to 121:	Reserved
Form 122:	Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 123:	Response to a Motion
Form 124:	Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children
Form 125:	Affidavit of Mailing Notice
Form 126:	Notice of Intent to File Written Application for Default Decree
Form 127:	Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children Form 128:

Forms 129 to 200: Reserved

[Court Order December 19, 2013]

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

Do not use this form if any of the following are true:

- · You are not married.
- . Neither you nor your spouse has lived in lowa for the last year before filing this Petition.
- · Petitioner or Respondent is pregnant.
- There are children 18 years of age or older (born or
- adopted) who still need support (for example, the child is in high school or college, or is disabled).
- There are children under the age of 18 who are children (born or adopted) of both spouses before or during the marriage, even if Petitioner or Respondent is not the natural parent.

 \blacksquare If filing electronically, you must provide any protected information in full on form 111.

 \blacksquare If filing in paper, you may use form 111 to provide any protected information in full.

	e lowa District Court for	County where you are	filing this Petition	County
III Ke	the Marriage of:			
Your cu	ırrent legal name	Your spouse 's	current legal name	
Upon	the Petition of			
		For clerk's use on	ly	
Petiti	Oner Your full name: first, middle, last		r Dissolution of or Dependent A	
and co	oncerning			
Resp	ondent Your spouse's full name: first, mide	dle, last		
	ersonal Information Fill in all in			
	d you fear for your safety, you may leave	your street address, phone		
		your street address, phone present residence:		
	d you fear for your safety, you may leave	your street address, phone present residence:	number, and email l	
	d you fear for your safety, you may leave Petitioner's (your) birth year and	your street address, phone present residence: Biri	number, and email l th year	blank. ZIP code
A.	d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address	your street address, phone present residence: Birn City () Phone number	number, and email l th year State Email a	blank. ZIP code ddress
A.	d you fear for your safety, you may leave Petitioner's (your) birth year and Petitioner's present street address County	your street address, phone present residence: Birn City () Phone number	number, and email but th year State Email a	blank. ZIP code ddress

Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

2. General Information About the Marriage and the Parties A. Date and location of the marriage Month City State B. Children Check all that are true (1) There are no children under the age of 18 who are children of both Petitioner and Respondent. (2) There are no children under the age of 18 who were adopted or born during this marriage. (3) There are no children 18 years of age or older who still need support. (4) Neither Petitioner nor Respondent is pregnant. C. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in lowa is just to get a divorce.) True If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False." (2) Petitioner has lived in Iowa for the last _____ years and ____ months __ county. If you have always lived in Iowa, count the time since your birth. If you have been a resident of another state, count the time since you last moved to Iowa. D. Parties' residence Check each that is true (1) Petitioner has lived in Iowa for more than one year. (2) Respondent (your spouse) is a resident of Iowa. E. Condition of the marriage Check all that are true The marriage is broken and cannot be saved. (2) This is the only divorce case going on involving this marriage. If you did not check (2), explain in H. You should also talk to an attorney.

(3) This Petition is being filed in good faith for the purpose of ending the marriage

(4) Counseling will not save the marriage. If counseling may save the marriage, do not check (4).

3.

 $Rule\ 17.100 — Form\ 101:\ \textit{Petition for Dissolution of Marriage with no Minor or Dependent Adult Children}, continued$

F.		ndent's status			
		ach that is true Respondent (your spouse) is in the mility of the control of the	rules that may prevent your case from	ı going forward	
	(2)	Respondent is in prison or jail at	ffacility	_ in State	
G.	Protect Check o	tive or no contact order			
	•	Respondent (your spouse). There is a "protective order" or a "no co If you check (2), fill in the following inform	ntact order" between Petitioner and		
		a. County and state where the order came	e from:	_	
		b. Court case number:	County	State	
ш	Other i	nformation:			
Pe	titione	r's Request			
A.		ner asks the court to: Il that apply. The court will only consider ite	ems that are checked.		
	_	End the marriage of Petitioner (you) and			
	(2)	Fairly divide the property and the debts	of the parties.		
	(3)	Order that Respondent pay the court fe	es.		
	(4) Order that Respondent pay for Petitioner's attorney's fees before the divorce is final. If you check (4), you must file form 122.				
	(5)	Order that Respondent pay spousal sup If you check (5), you must file form 122.			
	(6)	Change Petitioner's last name to:	Name can only be changed to name certificate or name used immediately to the marriage.		
		Print your former or birth name			
	(7)	Other request:			

 $\textbf{Rule 17.100} \\ \textbf{—Form 101:} \ \textit{Petition for Dissolution of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage With Note of Marriage with no Minor or Dependent Adult Children}, \textbf{continued Note of Marriage With Note of Marriage Wi$

4.	Attorney Help								
	Check one								
	A. O An attorney did not help me prepare or fill in this paper.								
	B. An attorney helped me prepare or fill in this paper.								
	If you check B, you mu	st fill in the following in	nformation:						
			_						
	Name of attorney or or	ganization, if any	Attorney's P.I.N.	#-Ask the attorne	y				
			_						
	Business address of att	orney or organization	City	State	ZIP code				
	()	()							
	()_ Attorney's phone numb	per Attorney's fo	x number – optional	Attorney's email	address – optional				
5	Service Instructions								
٧.	If Petitioner is filing in paper	er							
	Check one								
	A. Petitioner will acce	pt service of docum	ents at the attorn	ev's address lis	ted above: or				
	B. Petitioner will accep								
	B. O remotier will decop	e service or decarrie	1110 111 11110 0400 41	the manning addition	555 Belev.				
6.	Oath and Signature								
	1.	, hav	e read this Petitio	on, and I certify i	under penalty				
	I, Print your name	,		,,, ·	,				
	of perjury and pursuant to		e of lowa that the	information I ha	ave provided				
	in this Petition is true and	correct.							
		y, 20 <u>Year</u>	Your signature*						
	Signed on: Month Da	y Year	Your signature*						
	Mailing address		ity	State	ZIP code				
			,						
	() Phone number	Email address	440	litional email addre	ess if annlicable				
	1 none number	Email address	лии	monai eman adare	ss, ij applicaole				
	* Whether filing electronically or it		ite your signature on th	his form. If you are fi	ling electronically,				
	scan the form after signing it and	t then file electronically.							

Important Notice to Petitioner See next page for instructions for filing a Petition.

Instructions for Rule 17.100-Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

□ Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling.</u>
- After you have registered, <u>log in to the electronic filing system</u> to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (104) and a Protected Information Disclosure Form (111).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling
 of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see <u>My Filings Reference</u> <u>Guide</u>.

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Petition (101), you must also file a Petition Cover Sheet (102), an Original Notice (104a), and a Confidential Information Form (103).
- Forms 101 and 104a: Make two photocopies if you can deliver copies of these forms to your spouse
 in-person or by mail. Make three photocopies if you are going to ask the county sheriff or a civil
 process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 102 and 103: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a divorce.
- Give the clerk at the counter these forms:

Instructions for Rule 17.100—Form 101: Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

- 101 Petition for Dissolution of Marriage (Divorce) with no Minor Children
- 102 Coversheet for a Petition for Dissolution of Marriage with no Minor Children
- 103 Confidential Information Form (Do not make copies of this form.)
- 104a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 109.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (104a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.100—Form 102: Petition Cover Sheet for a Dissolution of Marriage with no Minor or Dependent Adult Children

For court use only Case nun	iber	County where case is fil	ed	_
Petitioner		·		
Petitioner's first name	Middle name	Last name		_
Street address		City	State	ZIP code
() Phone number Case name	Email addr	ess		
Petitioner's first name	Middle name	Last name		_
VS.				
Respondent's first name	Middle name	Last name		_

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the district court clerk when filing a
 Petition for Dissolution of Marriage with no Minor or Dependent Adult Children.
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- For electronic filers: You do not have to file this form. This information is automatically generated when you submit your documents electronically.

Rule 17.100—Form 103: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n	the Iowa District Court for	County where your	case is filed
Jp	on the Petition of	Equity case r	no
	titioner Full name: first, middle, last spouse who files the Petition for Dissolution of Ma		ential Information Form
n	d concerning		
	spondent Full name: first, middle, last other spouse		
١.	Petitioner's information		
	Full name: First, Middle, Last	Birth date	Social Security number
	Respondent's Information	, , , ,	
	Full name: First, Middle, Last	Birth date	Social Security number
	Signature of Provider of Info	ormation	
	Information provided by:	ur full name: first, middle, last	
	174490	ar year rearrest griss, interesses, saise	20
		Month	

Important Notice:

Do not give copies of this form to anyone except the clerk of court.

Rule 17.100—Form 104: Original Notice for Personal Service

Petitioner must serve the Petition on Res Failure to meet this deadline may result in the			Petition.	
Read the Guide to Representing Your	rself in an Iowa	Divorce Case on the I	owa Judicial	Branch website
for additional important instructions.				
 If filing electronically, Petit If filing in paper, Petitioner 				
If you do not understand how to use this	-		, talk to an at	torney.
In the Iowa District Court for				County
		County where Petit	ion is filed	
Upon the Petition of		Original Not	ice for Pe	rsonal Service
Petitioner Full name: first, middle, last				
and concerning				
Respondent Full name: first, middle, lo	ıst			
 Petitioner (your spouse) has f A copy of the Petition for Diss Petitioner asks for a divorce. Petitioner's contact information	solution of Mar	rriage is attached to		ent.
		renno	mer s name	
Mailing address	City		State	ZIP code
() Phone number	Email addr	ess	_	
Important in	istructions f	or Respondent on l	next page	
If you need assistance to participate in court due to a hearing or speech impaired may call Relay Iowa TTY contact information available at: http://www.iowacourt	(1-800-735-2942). I	Disability coordinators can		Persons who are advice. Disability coordinator

Rule 17.100-Form 104: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 101, you may use Answer form 115.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

Page 1 of 1

Rule 17.100—Form 104a: Original Notice for Personal Service

	the <u>Guide to Representing Yourself in an Iowa</u> tant instructions.	ı Divorce Case	on the Iowa Judic	ial Branch website	for additional
•	If filing electronically, Petitioner must us	e form 104 .			
	If filing in paper, Petitioner must use this	form.			
If you	do not understand how to use this form,	or if you shou	ld use this form, i	alk to an attorne	y.
In th	ne Iowa District Court for				County
		Сс	ounty where Petit	ion is filed	
Upo	n the Petition of		Equity case r	10	
Peti	tioner Full name: first, middle, last		Original No	tice for Per	sonal Service
	Tun name. jn si, madae, rasi				
and	concerning				
Res	pondent Full name: first, middle, last				
F	Petitioner's contact information during	the divorce	case: Petitione	r's name	
$\bar{\lambda}$	Aailing address C	ity :		State	ZIP code
		•			
(F	Phone number Email	address			
2. I	nstructions to Respondent N	amed Ab	ove		
:	You must file an Answer or a Motion withis Original Notice. If you do not file an court may enter a judgment against If you received Petition form 101 , you After you file your Answer or Motion, you	Answer or Mo	otion within 20 day titioner what he or swer form 115 .	/s after receiving she asked for in t	this Original Notice, the
(SEA	L)				
		Clerk	of Court		
-	ortant Notice to Respondent			(County Courthouse
	should talk to an attorney at once to oct your interests.				, lowa
P. 010	or your microoto.	City			ZIP code
	eed assistance to participate in court due to a disabil				Persons who are
	or speech impaired may call Relay lowa TTY (1-800 information available at: http://www.iowacourts.gov//				auvice. Disability coordinator

Rule 17.100—Form 104a

[Court Order November 6, 2013]

November 2013

Rule 17.100—Form 105: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for	County where Petition is filed	!	County
Upon the Petition of	Equity case no		
Petitioner Full name: first, middle, last	Acceptance	of Servi	ce
and concerning			
Respondent Full name: first, middle, last			
Petitioner must file this form with the clerk of cour	rt soon after Respondent signs it.		
Respondent must complete this section:	o Ooth and Signature		
Respondent's Acceptance of Service If Respondent completes this Acceptance of Service signing it. Petitioner will file it with the clerk of complete it.	e, Respondent must return this form to	Petitioner :	soon after
I,	, am Respondent in this c	ase. I rec	eived a copy
of the Original Notice and the Petition for the Cortify under penalty of perjury and pursuinformation I have provided in this Acceptation, 20, 20	uant to the laws of the State of ance of Service is true and cor	lowa that t	
Signed: Month Day Year	Respondent's signature		
Respondent's mailing address	City	State	ZIP code
Phone number Email address	<u> </u>		

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.100—Form 106: Directions for Service of Original Notice

Petitioner must complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

 $Do \ not \ use \ this form \ if \ Respondent \ has \ already \ received \ the \ Petition \ and \ Original \ Notice.$

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Petition (101) and Original Notice (104 if electronically filing or 104a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ouni	y where Petition is filed	Equity case number		
	lame and Location of Sho theck one and fill in the blanks	eriff or Other Process Serve	er	
Д	. Sheriff In county where R	espondent will be served County		
	Street address	City	State	ZIP code
В	Other process server			
	Name of other person servin	g the Notice		
	Street address	City	State	ZIP code
P	erson to be Served	(
Y	our spouse 's name	Phone number		
\overline{A}	ddress where your spouse can be s	erved City	State	ZIP code
P	erson Requesting Servic	ce ()		
Y	our name	Phone number		
\overline{Y}	our present mailing address	City	State	ZIP code

5. Costs of Service

Rule 17.100—Form 106: Directions for Service of Original Notice, continued

	Check one	
	A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 109.	or other process server.
	B. Costs for Sheriff deferred by court order:	
	,	Clerk of court: Sign only if costs deferred by court order
6.	Notification	
	After completion of service, the sheriff or other pro- requesting service.	cess server will notify the person
	, 20	
	Date signed: Month Day Year	Your signature

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (108) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for County where you filed the Petition				
Upon	the Petition of		e no.	
Petiti	Oner Full name: first, middle, last		otion and Affid erve by Publica	
and c	oncerning			
Resp	ondent Full name: first, middle, last			
	formation and Requests			
A.	Respondent's residence Check each that applies			
	(1) Respondent lives outside	de of Iowa.		
	(2) Respondent's residence	e and place of employment a	re unknown.	
B.	Respondent's last known res	sidence:		
	Street address	City	State	ZIP code
	County) Phone number	Email a	ddress
C.	Most recent date Responder	nt is known to have been a	t the address ab	ove:
		20		

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication, continued

[D. Petit	tioner has taken these steps to find Respondent:
E	E. Petit	tioner will publish notice in this newspaper:
		Name of newspaper
F		tioner asks the court to allow Petitioner to serve Respondent by publication because

Rule 17.100—Form 107: Motion and Affidavit to Serve by Publication, continued

2.	Attorney Help
	Check one

	Name of attorney or organization, if any	Attorney's P.I.N. ‡	+ $ Ask$ the attorney	
	Business address of attorney or organization	City	State	\overline{ZIP} co
	()			
	Attorney's phone number Attorney's fa	x number – optional	Attorney's email a	ddress – o _l
Oath		x number – optional	Attorney's email a	ddress – o _l
Oath	Attorney's phone number Attorney's fa	x number – optional	Attorney's email a	ddress – op
Oath	and Signature			
I,	and Signature	x number - optional re read this Motion		
l, <u>Prin</u> i	and Signature, have	e read this Motion	ı and Affidavit, ar	nd I certif
l, <u>Prini</u> under	and Signature, have, your name penalty of perjury and pursuant to the la	e read this Motion	ı and Affidavit, ar	nd I certii
l, <i>Prini</i> under	and Signature, have, have, penalty of perjury and pursuant to the laborovided in this Motion and Affidavit is tree.	e read this Motion	ı and Affidavit, ar	nd I certif
l, <u>Prini</u> under have	and Signature, have, have, penalty of perjury and pursuant to the laborovided in this Motion and Affidavit is tree.	re read this Motion aws of the State o ue and correct.	ı and Affidavit, ar	nd I certif
l, <u>Prini</u> under have	and Signature, have, your name penalty of perjury and pursuant to the la	e read this Motion	ı and Affidavit, ar	nd I certii
l, <u>Prini</u> under have	and Signature, have, have, penalty of perjury and pursuant to the laborovided in this Motion and Affidavit is tree.	re read this Motion aws of the State o ue and correct.	ı and Affidavit, ar	nd I certi

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.100—Form 108: Original Notice by Publication

Petitioner should complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: *Fill in third date of publication in section* 2 *below.*

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

ln	the lowa Dist	rict Court f	or	(County where	Petition is t	filed	County
Uŗ	on the Petitic	on of						
					Orig	inal Noti	ice by P	ublication
Pe	titioner Full na	me: first, middle, la	ıst		0.1.9		oc by .	abiloution
an	d concerning							
Re	spondent Fi	ull name: first, midd	lle, last					
1.	Information fo	r Responde	nt Named	Above	•			
	Petitioner (you	our spouse) has	filed a divor	ce lawsuit	naming you a	s Responde	nt.	
	Petitioner's control	ontact informati	on during the	e divorce c	ase:			
	Petitioner's f	îrst name	— Middle	name		ast name		
	Petitioner's p	oresent street ac	ldress	City			State	ZIP code
				()			
	County			Phone n	umber		Email a	ddress
2.	Respondent's	deadline fo	r filing a	Respons	se			
	You must file an	Answer or a	Motion with	the clerk	of court in the	ne above c	ounty with	nin 20 days after
			, 20					
	Month	Day	, 20 <u> </u>					
3.	Instructions t	o Responde	nt Named	l Above				
	You must file an A	Answer or a Mo If you do not re	tion with the spond, the c	e clerk of c ourt may e	nter a judgme	nt against ye		lays after the date etitioner what he or
			-		ice to Resp	ondent		
	 You should talk to If you choose not self-represented I 	to have an attorn	ey represent	you in this m		Iowa Judicial	Branch web	osite for
ıeaı	u need assistance to par ing or speech impaired r act information available	may call Relay lowa	TTY (1-800-73	5-2942). Dis a	bility coordinato	rs cannot prov	ride legal adv	Persons who are rice. Disability coordinator
Nov	rember 2013			Dula 17 10	0 Form 108			Page 1 of 2

Rule 17.100-Form 108: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in
 your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs

Petitioner uses this form only if Petitioner cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In t	the Iowa District Court for	County where your case is filed			
Up	on the Petition of	Equity case no			
Pet	titioner Full name: first, middle, last	Application and Affidavit to Defer Payment of Costs			
and	I concerning				
Res	spondent Full name: first, middle, last	-			
1.	Request				
	A. I am Petitioner.				
	B. For my Application and Affidavit, I state that: Check all that apply				
	(1) I am unable to pay the filing fee or	service costs or other court costs.			
	(2) \(\subseteq I ask the court for permission to pr	oceed without prepayment of costs and fees.			
	(3) I am filing this Application and Affic	davit in good faith.			
	(4)	asking for in this case.			
	C. Household				
	There are $\underline{\hspace{1cm}}$ people living in my ho	pusehold.			
	D. My household income is \$_Put the total amount of all income and benefits	per month. before deductions for all members of your household.			
	E. My income comes from: List the sources of your income. Examples: sala	ary, wages, or benefits such as unemployment, Title 19, FIP.			

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs, continued

F.	My household has th	e following monthly expenses:
	(1) Rent or mortgage	\$
	(2) Utilities	\$
	(3) Phone	\$
	(4) Food	\$
	(5) Transportation	\$
G	I have \$	in cash, checking, and savings

G. I have \$_____ in cash, checking, and savings.

Rule 17.100—Form 109: Application and Affidavit to Defer Payment of Costs, continued

A. An attorney did not help B. An attorney helped me p If you check B, you must fill is Name of attorney or organization Business address of attorney Attorney's phone number Certification of Service by I Section 3 to be completed only if filing This document, if filed electronically,	orepare or fill in in the following information, if any or organization Attorney's fax Mailing or Delayin paper or if the	this paper. formation: Attorney's P.I.N. City number - optional	# – Ask the attorn State	ZIP code
If you check B, you must fill is Name of attorney or organization Business address of attorney (n the following info ation, if any or organization Attorney's fax Mailing or Del	Attorney's P.I.N. City number – optional	State	ZIP code
Business address of attorney (or organization (City number – optional	State	ZIP code
Attorney's phone number Certification of Service by I Section 3 to be completed only if filing	Attorney's fax Mailing or Del	number – optional		
Certification of Service by I Section 3 to be completed only if filing	Mailing or Del		Attorney's ema	
Certification of Service by I Section 3 to be completed only if filing	Mailing or Del		Attorney's ema	
Section 3 to be completed only if filing	g in paper or if the	livery		il address – opti
I mailed or gave a copy of this App at this address: Name of person to whom I delivered or		avit to the other p	arty or the other	party's attorn
Party's or attorney's mailing address	City		State	ZIP code
Oath and Signature	_, have read thi	s Application an	d Affidavit, and	I certify unde
Print your name	the love of the	State of love th	at the information	on I hovo
penalty of perjury and pursuant to provided in this Application and A			at the information	Jii i iiave
Signed on: Month Day, 2	20Year Your	signature*		
Signed on: Monin Day	1ear 1our	signature -		
	City		State	ZIP code
Mailing address				
Mailing address				
	il address	Add	litional email addr	*ess – if available
	r, you must handwrite			

Rule 17.100—Form 110: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

This form is used only if someone other than Petitioner (you), a sheriff, or a process server delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ln	the Iowa District Court	for	County wher	ra Datition is	filed	County
			County wher	re remion is	пеа	
Up	on the Petition of		Equity	y case no.		
Pe	titioner Full name: first, middle,	last	_ A	Notice	Service of and Petition	n for
and	d concerning			Dissolu	ition of Mar	ilaye
Re	spondent Full name: first, m	ddle, last	_			
1.	Affidavit					
	1		delivere	d a convio	f the Original	Notice and
	I,Name of person – Cannot I	e Petitioner, sheriff	or process serve	er	r the Original	notice and
	Petition for Dissolution of					Check one
		J				
		on			20 at	O p.m.
	Name of Respondent	011 <u></u> Mon	nth	Day,	20 at Year	O p.m.
	by handing Respondent of	opies of the att	acried papers	5 .		
2.	Oath and Signature					
	To be completed by the person	who gave the Peti	tion and Origin	al Notice to R	lespondent.	
	l,		have re	ad this Affi	davit of Servi	ce and Leertify
	Print your name		,			
	under penalty of perjury a	nd nursuant to	the laws of th	ne State of	lowa that the	information I
	have provided in this Affic	•			TOWA LITAL LITE	'illomiation'
	•					
	Signed on: Month Day	, 20	V	*		
	Signed on: Month Day	rear	i our signatui	re ···		
	Mailing address		City		State	ZIP code
	() Phone number	Email address		Additi	onal email addi	ress – if available
	* If you are filing electronically, s	can the form after si	igning it and then	file electronic	ally.	
Nov	ember 2013	Rule	17.100—Form 1	10		Page 1 of 1

[Court Order November 6, 2013]

Rule 17.100—Form 111: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see division VI of Chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (111) and file it with the Petition (101) and Original Notice (104).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 111 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County
	County where the case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Protected Information Disclosure
and concerning	
Respondent Full name: first, middle, last	

For electronic filers:

A. Name

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to Iowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

Provide the complete version of protected information and the redacted version included in documents you file.

First	Middle Lass	t
Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
(1) Social security number	 XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	 xxx-xx-xxx	Last four digits only

Rule 17.100-Form 111: Protected Information Disclosure, continued

(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7)		
Additional protected information	Full information	Partial information
(8)		
Additional protected information	Full information	Partial information
(9)		
Additional protected information	Full information	Partial information
(10)		
Additional protected information	Full information	Partial information

[☐] Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent *The spouse who did not file for divorce.*

Provide the complete version of protected information and the redacted version included in documents you file.

A. Name		
First	Middle	Last
Protected Information Type	Complete Information (See Rules 16.602 and 16.604	
(1) Social security number	 XXX-XX-XXXX	Last four digits only
(2) Financial account numbers	Full account number	Partial account number only
(3) Date of birth	/ / mm/dd/yyyy	Year only
(4) Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
(5) Personal identification numbers	Full number	Partial only
(6) Other unique identifying numbers	Full number	Partial only
(7)		
Additional protected information	Full information	Partial information
(8)		
Additional protected information	Full information	Partial information
(9)		
Additional protected information	Full information	Partial information
(10)		
Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.100—Form 111: Protected Information Disclosure, continued

3.	Inform	ation	provided	d by:
٠.		IGLIVII	PIOVIAC	и му:

		/S/			
Handwritten signature of party completing this form or attorney if filing in paper			signature of par if filing electro	ty completing this nically	form
Law firm, if applicable		-			
Mailing address	City		State	ZIP code	
() Phone number					
Email address		Additional em	ail address, if ap	pplicable	
Month Day Day	<u>Year</u>				

Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

Use this Answer form 115 if you received Petition form 101, otherwise use form 116.

Read the Guide to Representing Yourself in an Iowa Divorce Case on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).
- If filing in paper, you may use form 111.

n the Iowa District Court for County	v where your spouse filed the Petition County
Upon the Petition of	Equity case no
Petitioner Your spouse's full name: first, middle, last	Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children
and concerning	
Respondent Your full name: first, middle, last	
A. Petitioner's information Check one	
(2) O Petitioner's birth year and present res The correct information is: Birth year	r and present residence are correct in the Petition. sidence are not correct in the Petition. r
(1) Petitioner's (your spouse's) birth year (2) Petitioner's birth year and present result the correct information is:	r and present residence are correct in the Petition. sidence are not correct in the Petition.
(1) Petitioner's (your spouse's) birth year (2) Petitioner's birth year and present res The correct information is: Birth year Present street address	r and present residence are correct in the Petition. sidence are not correct in the Petition. r

					- -	-
	Present street addre.	SS	City		State	ZIP code
	County	(hone number		— Email a	Adress
~	•	tha Ma	rriage and	the Dartie		aaress
	eneral Information Abo		rriage and	the Parties	5	
Α.	Date and location of the r	narriage				
	If paragraph 2A of the Petitio	on (form 101) i	is not correct, o	check (2) and fi	ill in the blank	ks.
	(1) The date and location					
	(2) The date and location					
	The correct inform	ation is:				
			_,	_		
	Month	Day	Year	City		State
B.	Children					
	Check all that are true					
	If you do not check one or mo	re of these bo	xes, explain in	2I.		
	(1) There are no childre	en under the a	ige of 18 who	are children of	both Petition	er and Respond
	(2) There are no childre	en under the a	age of 18 who	were adopted	or born durir	ng this marriage
	(3) There are no children	en 18 years of	f age or older	who still need	support.	
	(4) Neither Petitioner n	or Responder	nt is pregnant.			
	Petitioner's residence					
C.	1 0111101101 0 1001401100					
C.	(1) The only reason that F	Petitioner (you	ur spouse) is	living in Iowa	is just to get	a divorce.
C.		Petitioner (you	ur spouse) is	living in Iowa	is just to get	a divorce.
C.	(1) The only reason that F	live in Iowa, o	. ,	-	, -	
C.	(1) The only reason that F True False If you do not	live in Iowa, o ck "False."	or if you live in	a Iowa for reasc	ons other than	
C.	(1) The only reason that F True False If you do not divorce, check	t live in Iowa, o ck "False." agraph 2C(2) o	or if you live in	lowa for reaso	ons other than	i just to get a

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

D.	Parties' residence
	Check each that is true
	(1) Respondent (you are Respondent) is a resident of lowa.
	(2) Petitioner (your spouse) has lived in Iowa for more than one year.
	If you did not check (1) or (2) , you should talk to an attorney.
E.	Condition of the marriage
	Check all that are true
	(1) The marriage is broken and cannot be saved.
	(2) This is the only divorce case going on in involving this marriage. If you did not check (2), explain in 2I. You should also talk to an attorney.
	(3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage.
	(4) \square Counseling will not save the marriage. If counseling may save the marriage, do not check (4).
F.	Respondent's status Check each that is true
	(1) Respondent (you are Respondent) is in the military service.
	If you check (1), note that there are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney.
	(2) \square Respondent is in prison or jail at ${Name\ of\ facility}$ in ${State}$
	If you are in prison or jail, you may be entitled to a "guardian ad litem," a person, usually an attorney, appointed to protect the interests of a spouse in some cases.
G.	Protective or no contact orders Check one
	(1) O There is neither a "protective order" nor a "no contact order" between Respondent (you) and Petitioner (your spouse).
	(2) There is a "protective order" or "no contact order" between Respondent and Petitioner. If you check (2), fill in the following information:
	a. County and state where the order came from:
	County State
	b. Court case number:
Н.	Respondent denies anything in the Petition that Respondent has not agreed is correct.
I.	Other information:

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued$

3. Respondent's Request

A.	•	ondent asks the court to:				
	Check all that apply. The court will only consider items that are checked. If you do not know what you want, talk to an attorney.					
	(1)	☐ End the marriage of Respondent (you) and Petitioner (your spouse).				
	(2)	2)				
	(3)	Order that Petitioner pay the court fees.				
	(4)	Order that Petitioner pay for Respondent's attorney's fees before the divorce is final <i>If you check</i> (4), <i>you must file form 122</i> .				
	(5)	Order that Petitioner pay spousal support (alimony) to Respondent. If you check (5), you must file form 122.				
	(6)	Change Respondent's last name to:	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.			
		Print your former or birth name	to the manninger			
В.	☐ Otl	her request:				

 $Rule\ 17.100 - Form\ 115: Answer\ to\ Petition\ for\ Dissolution\ of\ Marriage\ with\ no\ Minor\ or\ Dependent\ Adult\ Children,\ continued\ Adult\ Children,\ Continued\ Adult\ Children,\ Continued\ Children,\ Children$

4.	Attorney Help Check one								
	\sim		did not b	aln ma nran	0r0 0r	fill in this namer			
	 A. O An attorney did not help me prepare or fill in this paper. B. O An attorney helped me prepare or fill in this paper. 								
	В. ()	-	•	ne prepare o fill in the follov					
	Name of attorney or orgo		anization, if any	,	Attorney's P.I.N.	# $-Ask$ the attor	ney		
		Business addr	ress of attor	ney or organiza	ation	City	State	ZIP code	
		() _ Attorney's pho	one number	() _ ev 's fax	: number – optional	Attornev's em	ail address – optional	
5.	Servi	ce Instructi			-7 7				
٠.		ondent is fil		er					
	Check o								
	A. ()	Respondent	t will acce	pt service of	docum	ents at the attorr	ney's address l	isted above; or	
	В. (Respondent	will acce	ot service of d	locume	ents in this case a	it the mailing a	ddress below.	
^	04:6	:4: f (Samiaa I	h. Mailina	D-	li			
ъ.	Section	6 to be complete	ted only if f	by Mailing (îling in paper o ılly, will automo	or if the	other party is exem be served on registe	pt from electroni ered parties.	c filing.	
	I.			•	•	9	•	. 20	
	Print	your name			,	fy that on <i>Month</i>	Da	y Year	
		_	copy of th	nis Answer to	the o	ther party or the	other party's	attorney at this	
	addres	SS:							
	Name o	f person to who	om I deliver	ed or mailed it	-				
		or attorney's m			City		State	 ZIP code	
7			_	ress	City		Siale	ZIF Coue	
۲.		and Signat	ure						
	l,, h					read this Answ	er, and I certify	y under penalty	
			uant to th	ne laws of the	State	of lowa that the	information I	have provided	
	in this	Answer is tru	ue and co	rrect.					
				, 20					
	Signed	on: Month	Day	Year	Your	signature*			
	Mailing	address			City		State	ZIP code	
	(
	Phone r	number		Email address			itional email ada	-	
			ning it and ti	hen file electronic	cally	te your signature on th		e filing electronically,	
			ımportan	t instructions	tor filin	g this form on nex	t page.		

Instructions for Rule 17.100—Form 115: Answer to Petition for Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

■ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see How to eFile to an Existing Case.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the
 attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

November 2013

Rule 17.100—Form 116: General Answer to a Petition

Respondent must file an Answer within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against Respondent giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 101, use form 115 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111).
- If filing in paper, you may use form 111 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where Petition is filed
Upon the Petition of	Equity case no
Petitioner Your spouse's full name: first, middle, last	General Answer to a Petition
and concerning	
Respondent Your full name: first, middle, last	

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true: List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know how something, such as a date, place, or when something happened.

Rule 17.100-Form 116: General Answer to a Petition, continued

D.	Protective or no contact orders						
	Chec	k or	<i>ne</i>				
	(1) (C		re is neither a "protective order" no tioner (your spouse).	r a "no contact order" betwee	en Respondent (you) and	
	(2)	\mathcal{L}	The	re is a "protective order" or "no con	tact order" between Respon	dent and Petitioner.	
	`		If yo	ou check (2), fill in the following info	rmation:		
			a.	County and state where the order ca			
					County	State	
			b.	Court case number:			
E.	Res	por	ndei	nt denies anything in the Petiti	on that is not admitted in	this Answer.	
F.	Othe	er in	nfor	mation:			

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

3. Attorney Help

Rule 17.100—Form 116: General Answer to a Petition, continued

Name of attorne	ry or organizat	ion, if any	Attorney's P.I.1	V. # $-Ask$ the atta	orney
Business addres	s of attorney o	r organization	City	State	ZIP code
()_ Attornev's phon	e number	_ () Attornev's fo	x number – optional	Attornev's en	nail address – optic
Service Instructio		, ,	1	,	1
If Respondent is filing	g in paper				
Check one					
A. Respondent v	will accept se	ervice of docu	ments at the att	torney's addres	s listed above;
B. Respondent v	vill accept se	rvice of docui	ments in this cas	e at the mailing	address below
Certification of Se	ervice by M	lailing or D	eliverv		
Section 5 to be completed	d only if filing i	in paper or if th	e other party is exe		ic filing.
			u ha carvad on raci	etorod nartice	
This document, if filed el			_	-	
I,			_	-	, 20
I, Print your name		, cer	tify that on	$\frac{1}{h}$ \overline{D}	•
I, Print your name I mailed or gave a co		, cer	tify that on	$\frac{1}{h}$ \overline{D}	
I,		, cer	tify that on	$\frac{1}{h}$ \overline{D}	
I, Print your name I mailed or gave a coaddress:	ppy of this A	, cer	tify that on	$\frac{1}{h}$ \overline{D}	•
I, Print your name I mailed or gave a co	ppy of this A	, cer	tify that on	$\frac{1}{h}$ \overline{D}	•
I, Print your name I mailed or gave a coaddress:	opy of this A	, cer	tify that on <u>Mont</u> Other party or th	$\frac{1}{h}$ \overline{D}	•
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man	opy of this A	nswer to the	tify that on <u>Mont</u> Other party or th	h D	attorney at thi
I, Print your name I mailed or gave a coaddress: Name of person to whom	opy of this A	nswer to the mailed it	tify that on Mont Mont other party or th	th D ne other party's State	attorney at this
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I,	opy of this A	nswer to the mailed it	tify that on <u>Mont</u> Other party or th	th D ne other party's State	attorney at this
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I, Print your name	I delivered or liling address	nswer to the mailed it City	tify that on Monto	th D ne other party's State wer, and I certi	attorney at thi $\overline{ZIP\ code}$
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I,	I delivered or illing address	nswer to the mailed it City	tify that on Monto	th D ne other party's State wer, and I certi	attorney at thi
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I, Print your name of perjury and pursua	I delivered or illing address	nswer to the mailed it City	tify that on Monto	th D ne other party's State wer, and I certi	attorney at thi $\overline{ZIP\ code}$
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I, Print your name of perjury and pursua	I delivered or illing address	nswer to the mailed it City	tify that on Monto	th D ne other party's State wer, and I certified the information	attorney at thi
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's man Oath and Signatu I, Print your name of perjury and pursua in this Answer is true	I delivered or illing address	mailed it City ws of the State , 20 Year	tify that on Monto	th D ne other party's State wer, and I certified the information	attorney at thi ZIP code fy under penal I have provide
I, Print your name I mailed or gave a coaddress: Name of person to whom Party's or attorney's mailed Oath and Signatu I, Print your name of perjury and pursua in this Answer is true Signed on: Month	I delivered or illing address	mailed it City ws of the State , 20 Year	tify that on Montother party or the read this Ansie of Iowa that the Your signature	th D ne other party's State wer, and I certi the information	attorney at thi ZIP code fy under penal I have provided ZIP code

Instructions for Rule 17.100-Form 116: General Answer to a Petition, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

□ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- · Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 101).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the
 attorney's address on the Petition if box 5B on the Petition is checked.

Do not file these instructions

November 2013 Instructions for Rule 17.100—Form 116

Page 1 of 1

[Court Order May 16, 2007; November 6, 2013]

Forms 117 to 121: Reserved

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n the Iowa District Court for	ounty where your case is filed		_ Count
Upon the Petition of	Equity case no.		
Petitioner Full name: first, middle, last and concerning	Motion in a Dissolution Marriage with no Mind Dependent Adult Child		or
Respondent Full name: first, middle, last			
A. Petitioner B. Respondent I. Request A. I ask the court to Check all that apply. If you check any box in A, you (1) Change the hearing date that has be (2) Crder counseling (conciliation). (3) Set a hearing date for a divorce Dec (4) Award me attorney's fees before the (5) Award spousal support (alimony) to (6) Shorten the 90-day waiting period fo	een set for Month Tree by default. divorce is final. me before the divorce is final.	aaking this red Day	quest in B. , 20 Year
(7) Other request ExplainB. I am making the request(s) in this Motion	n because:		

2. Attorney Help

Page 2 of 2

Rule 17.100—Form 122: Motion in a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

	Traine of attorney or organiza	ation, if any A	ttorney's P.I.N. #	– Ask the attori	<i>1</i> еу
	Business address of attorney	or organization C	ity	State	ZIP code
	() Attorney's phone number	() Attorney's fax nu	mber – optional	Attorney's ema	il address – op
Secti	tification of Service by ion 3 to be completed only if filing document, if filed electronically,	g in paper or if the othe	er party is exempt	-	filing.
I.		. certify t	hat on		. 20
" \overline{Pr}	int your name	, oorany a	Month	Day	, 20 <u> </u>
Oat	h and Signature				
		, have rea	ad this Motion, a	and I certify u	nder penalty
I,	nt your name	af the Otata of laws		iation i nave r	
I, <i>Prin</i> perje	nt your name ury and pursuant to the laws ion is true and correct.		a that the inform	ation mave p	provided in ti
I, <i>Prin</i> perji Moti	nt your name ury and pursuant to the laws ion is true and correct.	of the State of lower $\frac{20}{Year}$ $\frac{7000}{Your sign}$		auon mave p	provided in ti
I, Prin perju Moti	nt your name ury and pursuant to the laws ion is true and correct.			State	ZIP code
I, Prin perju Moti	nt your name ury and pursuant to the laws ion is true and correct. ed on: Month Day ing address	20 Year Your sign	nature*		ZIP code

Rule 17.100—Form 122

November 2013

Rule 17.100-Form 123: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 122) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County Where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Response to a Motion
and concerning	
Respondent Full name: first, middle, last	
why you disagree with the request in C. (1) Change the hearing date that had (2) Order counseling (conciliation). (3) Set a hearing date for a divorce (4) Award my spouse attorney's fee	as been set for

Rule 17.100—Form 123: Response to a Motion, continued

C. I disagree with the Motion because:		

Page 3 of 3

Rule 17.100-Form 123: Response to a Motion, continued

В				or fill in this paper. wing information:			
	Name of attor	rney or organiz	ation, if any	v Attorney's P.I.N.	# – Ask the att	orney	
	Business addi	ress of attorney	or organiz	ation City	Sta	te ZIP cod	le
	() Attorney's ph	one number	(Attorn	ney 's fax number – optiona	Attorney's	email address -	option
Se	_	ted only if filin	g in paper o	or Delivery or if the other party is ex atically be served on reg		ronic filing.	
1.				_, certify that on $\underline{\hspace{2cm}}_{Mon}$. 20	
	D : .			Mon	th	\overline{Day} \overline{Y}	ear
l r th				e to the other party o	or the other pa	arty's attorne _y	/ at
l r th	mailed or gave a iis address:	om I delivered (or mailed it	_	or the other pa		
$\frac{1}{N}$ th $\frac{1}{N}$	mailed or gave a his address: ame of person to who harty's or attorney's neath and Signat	om I delivered o nailing address ture	or mailed it	- City	Sta.	te ZIP cod	'e
I r th \overline{No} \overline{Po} 5. O	mailed or gave a his address: ame of person to who harty's or attorney's neath and Signat	om I delivered o nailing address ture	or mailed it	-	Sta.	te ZIP cod	'e
I r th No Pc	mailed or gave a nis address: ame of person to who arty's or attorney's neath and Signat Print your name enalty of perjury a	om I delivered on ailing address ture	or mailed it	- City , have read this Res	Stansponse, and I	te ZIP cod	le
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I r th \overline{Na}	mailed or gave a nis address: ame of person to who arty's or attorney's neath and Signate Print your name enalty of perjury a nd that the information on the modern of th	om I delivered on ailing address ture and pursuant ation I have pu	or mailed it	City , have read this Research of the State of lower and correct Tour signature* City	sponse, and I that I have re	te ZIP cod	onse

Rule 17.100—Form 123

November 2013

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information. **Each party** must complete one of these forms.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for		County where	your case is filed	County
Upon the Petition of		Equity ca	ase no	
Petitioner Full name: first, middle, last		_	inancial Affidavit f issolution of Marri with no Minor o	iage
and concerning	De	Dependent Adult Children		
Respondent Full name: first, middle,	last	-		
l am				
Check one				
A. O Petitioner				
B. Respondent				
I.		. state that thi	s is a true and comple	ete statement
Print your name				
of my assets, debts, a	nd present	income as of th	eday of <i>Dav Month</i>	, 20
1. Assets Things you and your spo			Day Monin	1eur
A. Real estate Attach additional sheets if neces *Owner (Whose name is on the	ssary.	Petitioner $R = R\epsilon$	espondent J=Joint (Both	n)
Type of real estate	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Homestead Address			Φ.	
		\$	to:	\$
(2) Other real estate Address		\$	\$	\$

Check this box if you have attached a sheet with additional information on other assets.

to:

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

Vehicles Make (e.g. Ford) Year	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net Value Market value minus debt owed
(1)		\$	\$	\$
		Ψ	to:	Ψ
(2)		\$	\$	\$
		 	to:	Ψ
(3)		c	\$	6
		\$	to:	\$

Check this box if you have attached a sheet with additional information on other vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?):

P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds Company name	Owner* P,R,J	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
(1)			to:	Ψ
(2)		\$	\$	\$
(2)		Ψ	to:	y
(2)		\$	\$	\$
(3)		Φ	to:	Φ

Check this box if you have attached a sheet with additional information on other securities, stocks, & bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

Life insurance Company name	Owner* P,R,J	Cash value Not death benefit	Loan from cash value Total amount still owed on loan	Cash value Minus loan owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

[☐] Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash"	Owner*	Cash value	Personal loans or overdraft accounts Total amount you still owe on it	Net value Cash value minus loan / overdraft owed
(1)		\$	\$	₩
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on other checking & savings accounts.

F. Household

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Household contents Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed	
(1) Furniture			\$		
a.		\$	to:	\$	
b.		\$	\$	\$	
D.		Ψ	to:	V	
C.		\$	\$	\$	
C.		\$	to:	Ф	
d.		\$	\$	\$	
u.			to:	Φ	
(2) Appliances / Electronics		•	\$	•	
a.		\$	to:	\$	
h		¢	\$	•	
b.		\$	to:	\$	
		\$	\$	•	
C.		D	to:	\$	
d.		\$	\$	•	
u.		Ψ	to:	\$	
(3) Other contents		•	\$	•	
a.		\$	to:	\$	

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

b.	\$	\$ to:	\$
C.	\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc.	Owner*	Market value What it would sell for	Loan from retirement account Total amount you still owe on it and to whom owed	Net value Market value minus loan owed
(1)		\$	\$ to:	₩
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

Check this box if you have attached a sheet with additional information on other retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
(1)		Ψ	to:	•
(2)		\$	\$	\$
(2)		Φ	to:	Ψ
(3)		¢	\$	¢
(3)		\$	to:	\$

Check this box if you have attached a sheet with additional information on other assets.

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

Totals

(1)	Total from attached sheets	Listed in 1A-H.	\$
(2)	Total net value of assets	Listed in 1A-H.	\$

2. Other Debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

Other debts List only those not included as "debt" or "loans" under "Assets" in part 1.	Whose debt?*	Amount owed
(1)		\$
(2)		\$
(3)		\$
(4)		\$
(5)		\$
(6)		\$
(7)		\$
(8)		\$
(9)		\$
(10)		\$
(11)		\$
(12)		\$
(13)		\$
(14)		\$
(15)		\$
Check this box if you have attached a sheet with additional information on other debts, and enter the total.		\$
Total other debts Including amounts shown on attached sheet, if any.	-	\$

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

3. Income and Deductions

A. Petitioner's Income and Deductions If you are Respondent, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

Current income and deductions	In	Income		uctions
for Petitioner Sources of income and deductions	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
(1) Wages from employer Employer name: Job title:		\$		\$
(2) Wages from employer Employer name: Job title:		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other Identify:		\$		\$
(7) Other Identify:		\$		\$
(8) Other <i>Identify:</i>		\$		\$
(9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.		\$		\$
Totals Current income and deductions for Petitioner		\$ Income total		\$ Deductions

 $Rule\ 17.100 - Form\ 124: \textit{Financial Affidavit for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of the$

B. Respondent's Income and Deductions If you are Petitioner, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

	In	come	Ded	uctions
Current income and deductions for Respondent Sources of income and deductions	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
(1) Wages from employer Employer name: Job title:		\$		\$
(2) Wages from employer Employer name: Job title:		\$		\$
(3) Unemployment assistance		\$		\$
(4) Family Investment Program		\$		\$
(5) Social Security		\$		\$
(6) Other <i>Identify:</i>		\$		\$
(7) Other <i>Identify:</i>		\$		\$
(8) Other Identify:		\$		\$
(9) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Respondent's income and deductions.		\$		\$
Totals Current income and deductions for Respondent		\$ Income total		\$ Deductions total

4. Expenses

A. Living arrangements

Check o	ne
(1)	My spouse and I live in the same home.
(2)	My spouse and I do not live in the same home

Rule 17.100—Form 124: Financial Affidavit for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

B. My expenses

Note: You must complete this section if you or your spouse wants spousal support (alimony). *How often paid?: $W = Weekly \ B = Bi-weekly$ (every other week) M = Monthly

T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$
(5) Medical, dental Not health insurance payments – see 4B(10).			\$
(6) Utilities (gas, electric)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense Identify:			\$
(15) Other expense Identify:			\$
(16) Other expense Identify:			\$
(17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses.			\$
Total expenses			\$

ZIP code ddress – opti
ddress – opti
ng.
, 20
ZIP code
I certify
ad this
ZIP code

Rule 17.100—Form 125: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed
Upon the Petition of Petitioner Full name: first, middle, last	Equity case no Affidavit of Mailing Notice
and concerning	
Respondent Full name: first, middle, last	-
 Attorney Help Check one A. An attorney did not help me prepa B. An attorney helped me prepare or If you check B, you must fill in the following Name of attorney or organization, if any 	fill in this paper.
Business address of attorney or organizat	ion City State ZIP code
Attorney's phone number Attorney	y's fax number – optional Attorney's email address – optional

Important Notice to Petitioner

Petitioner **must** file this if he or she served Notice by Publication in a newspaper and asks the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

Petitioner's Oath and Signature on next page

Rule 17.100-Form 125: Affidavit of Mailing Notice, continued

Petitioner's Oath and Signature			
l,,	, certify under per	nalty of perjury and	I pursuant to the
Print your name			
laws of the State of lowa that on the	day of	, 20, I s	sent by ordinary
Day		Year	
mail with proper postage, the following p	paper or papers:		
Check one			
Original Notice and Petition for Disso	lution of Marriage,	or	
Notice of Intent to File a Written Appl	ication for Default I	Decree	
to Respondent's last-known address as	follows:		
to respondent s last known address as	10110443.		
Respondent's street address	City	State	ZIP code
Signed on: Month Day Year	 Petitioner's signa	. *	
Signed on: Month Day Year	Pennoner's signa	ture "	
Mailing address	City	State	ZIP code
,			
Phone number Email address		Additional email ac	Idvagg ifil-bl-
1 none number Emuli dadress		лишити стан ас	ын өзэ — 11 avanavie
* Whether filing electronically or in paper you must	handwrite vour signati	re on this form If you a	re filina electronically

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically scan the form after signing it and then file electronically.

Rule 17.100—Form 126: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Cour		ounty where your case is filed		County
		ounty where your case is filed		
Upon the Petition of		Equity case no		
Petitioner Full name: first, middle	e, last	Notice of Intended		
and concerning				
Respondent Full name: first, n	niddle, last			
То:				
Respondent's first name	Middle name	Last name		
Date of Notice:		20		
Month	Day,	Year		
	Important Notice	e to Respondent:		
Handwritten signature of Petitione if filing in paper	er or attorney o	if filing electronically	Petitioner or	r Attorney
The person who provided the signs	ature above must fill in	the information below.		
Present street address (If attor	rney, firm address)	City	State	ZIP code
Phone number	Email add	rann.	_	
Instructions for Petitioner	Emaii aaa	ress		
	atuania aller			
Filing your Notice election EDMS will automatically filing requirements.	•	ess Respondent is exempt from	electronic	
Filing your Notice in p	paper (if you have rece	eived permission from the cour	t to file in p	aper)
 Deliver a copy of this Complete form 125 ar File the original of this Keep a copy for your 	nd file the original at the s form (126) at the clerk	e clerk of court's office.		
November 2013	Pule 17	100—Form 126		Page 1 of

Rule 17.100—Form 127: Request for Relief in a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or sensitive information.

Use this form only if you have filed a Petition for Dissolution of Marriage (101) and:

- Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (128).
 - If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
 - ffiling in paper, you may use form 111 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n the Iowa District Court for	County where your ca	se is filed	Count
Upon the Petition of	Equity case no)	
Petitioner Full name: first, middle, last	of Marri	r Relief in a age with no dent Adult (
and concerning			
Respondent Full name: first, middle, last	_		
 Personal Information Fill in all information and you fear for your safety, you may leave your 			
I am Check one A. Petitioner B. Respondent (1) Petitioner's birth year and preser	nt residence: Birth year		
Check one A. O Petitioner B. O Respondent		State	ZIP code
Check one A. Petitioner B. Respondent (1) Petitioner's birth year and preser	Birth year	State Email a	
Check one A. O Petitioner B. O Respondent (1) Petitioner's birth year and preser Petitioner's present street address	Birth year City Phone number	Email a	
Check one A. O Petitioner B. O Respondent (1) Petitioner's birth year and preser Petitioner's present street address County	City _ () Phone number sent residence:	Email a	

Re	quest 1	for Relief
A.	Childre	n Check all that are true
	(1)	There are no children under the age of 18 who are children of both Petitioner and Respondent.
	(2)	There are no children under the age of 18 who were adopted or born during this marriage.
	(3)	There are no children 18 years of age or older who still need support.
	(4)	Neither Petitioner nor Respondent is pregnant.
В.	Breako	down of marriage
	The ma	rriage is broken down and cannot be saved.
C.	Couns	eling
	Counse	ling will not save the marriage.
D.	Waiting	period before decree Check one
	(1)	More than 90 days have passed since Respondent was served with an Original Notice.
		Fewer than 90 days have passed since Respondent was served with an Original Notice, but I want the court to take action right away without a separate hearing. There are no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how I would like to settle all issues in my divorce.
E.	Financi	ial affidavits Check one
		I filed a Financial Affidavit (124). I certify that I have fully disclosed all income and the identity and value of all assets and debts.
	(2) 🔘	I am asking that the court not require me to file a Financial Affidavit. Explain
F.	Division	n of personal property Check one
		All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. If you check (1) , skip to G .
	(2)	I ask that our personal property be divided as follows: Attach additional sheets if necessary.
	a.	Petitioner will get the following as Petitioner's separate personal property:
	b.	Respondent will get the following as Respondent's separate personal property:
	A. B. C. D.	(1)

G.	For ea	on of real estate ch parcel of real estate you own, provide a separate sheet for each additional parc	v o v	
	. ,	wnership of real estate heck one		
	a.	We do not own any real estate.		
	b.	We own real estate located at:	Street address	,
		in the City of	, County of	, and
		State of	This land is described in the deed as follows:	
	` '	to Respondent. Awarded to Petitioner, subject to Awarded to Respondent, subject	<u> </u>	
	(3) A	dditional real estate		
		Check this box if you are attaching sep	arate sheets for additional parcels of real estate.	
Н.	Divisi Check	on of debts one		
	(1)	There are no debts.		
	(2)	I have listed all the debts I know ab Attach additional sheets if necessary.	out and ask that they be divided as follows:	
	a.	Petitioner will pay the following deb	ts:	

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$

		(c)		\$
		(d)		\$
		(e)		\$
		Check this box if you are attaching a separate Petitioner's debts.b. Respondent will pay the following debts		about
		i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
		(a)		\$
		(b)		\$
		(c)		\$
		(d)		\$
		(e)		\$
I.	l as	Petitioner pay Respondent \$	pouse who made the debt will pany money to the other. to equalize the days, 20 Year	ay that debt.
J.	Che	ousal support (alimony) ck one sk that: Neither Petitioner nor Respondent pay s	spousal support (alimony) to th	e other.

3.

K.	Name change Check one	
	I ask that my last name	
	•	
		Norman and the state of the
	(2) Be changed to: Print your former or birth name	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.
L.	Court fees	and the state of t
	Check one	
	I ask that	
	(1) Petitioner will pay all court fees.	
	(2) Respondent will pay all court fees.	
	(3) Petitioner and Respondent shall each pay one-half of	the remaining court fees.
	(4) Petitioner and Respondent shall each pay one-half of	
М.	Attorney's fees	
	Check one	
	(1) \(\infty\) I have no attorney's fees.	
	(2) I will pay my own attorney's fees.	
	(3) I ask that my spouse pay me \$ for a	ttorney's fees.
N.	Necessary documents	
	I ask that the court require each of us to sign and deliver to ea needed to carry out the terms of the Decree.	ch other any papers that may be
Ο.	Other request for relief Attach additional sheets if necessary	
	atements of understanding and fact	
A.	☐ I have made a full disclosure of my property and deb	ts to the court.
B.	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	orce.
C.	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	make it part of the final Decree.
	Continued on next page	

4. Attorney Help

			Attorney's P.I.N. #	– Ask the attorn	ey
	Business address of attorney	or organization	City	State	ZIP code
	()_ Attorney's phone number	() . Attorney's fa:	x number – optional	Attorney's emai	l address – optio
l mai addre	et your name ed or gave a copy of this less: of person to whom I delivered of	Request to the		-	
	is or attomey's mailing address		e read this Reques	State	ZIP code
	nt your name rjury and pursuant to the la s Request is true and corre	aws of the State ect.			
in thi	d on: Month Day	1 cui			ZIP code
in this	d on: Month Day		ity	State	
Signed Mailir	g address				ess, if applicabl
Signed Mailir (g address	Ci ail address			Additional email addre

Rule 17.100—Form 128 Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children

Caution: This form may require you to provide protected or confidential information.

Use this form only if you and your spouse both agree to the terms of a settlement agreement.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (111) if you have not already done so.
- If filing in paper, you may use form 111 to provide any protected information in full.

Do not use this form if:

- You and your spouse have children under the age of 18, or
- You and your spouse have children 18 years of age or older who still need support.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the	lowa District Court for	County where you	r case is filed	County
Upo	n the Petition of	Equity cas	se no	
Petit	ioner Full name: first, middle, last	Dissol	lement Agreem lution of Marria r Dependent Ac	ge with no
and o	concerning			
Resp	pondent Full name: first, middle, last			
	rsonal Information Fill in all in			ulted by your spouse
and	ersonal Information Fill in all in all in all you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address	your address, phone numb	per, and email blank.	ulted by your spouse ZIP code
and	l you fear for your safety, you may leave Petitioner's birth year and prese	your address, phone numb nt residence: Birth yea.	er, and email blank. r	ZIP code
A.	you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address	your address, phone numb nt residence: Birth year City Phone number	r State Email a	ZIP code
A.	Petitioner's birth year and prese Petitioner's present street address County	your address, phone numb nt residence: Birth year City Phone number esent residence:	r State Email a	ZIP code

 $Rule\ 17.100 — Form\ 128: \textit{Settlement Agreement for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of th$

December 2020

2. Agreements

	e agree to the following:					
A.	Children Check all that are true					
	(1) There are no children under the age of 18 who are children of both Petitioner and Respondent.					
	(2) There are no children under the age of 18 who were adopted or born during this marriage.					
	(3) There are no children 18 years of age or older who still need support.					
	(4) Neither Petitioner nor Respondent is pregnant.					
B.	Breakdown of marriage					
_	The marriage is broken down and cannot be saved.					
C.	Counseling Counseling will not cave the marriage					
П	Counseling will not save the marriage. Waiting period before decree Check one					
Ο.						
	(1) More than 90 days have passed since Respondent was served with an Original Notice.					
	(2) Fewer than 90 days have passed since Respondent was served with an Original Notice, but we want the court to take action right away without a separate hearing. We have no children affected by this action. Neither Petitioner nor Respondent is pregnant. This paper explains how we would like to settle all issues in our divorce.					
E.	Financial affidavits Check one					
	(1) Petitioner or Respondent has filed a Financial Affidavit (124).					
	If you check (1), check a and/or b.					
	 a. Detitioner has filed a Financial Affidavit. Petitioner certifies that Petitioner has fully disclosed all income and the identity and value of all assets and deb 					
	b. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent					
	has fully disclosed all income and the identity and value of all assets and debts.					
	(2) We are asking that the court not require us to file Financial Affidavits because: Explain					
F.	Division of personal property Check one					
	(1) We have divided our personal property. Petitioner will keep the personal property in Petitioner's possession. Respondent will keep the personal property in Respondent's possession.					
	If you check (1), skip to G.					
	(2) Our personal property will be divided as follows: Attach additional sheets if necessary.					
	a. Petitioner will get the following as Petitioner's separate personal property:					

	Bespondent will get the following as Respondent's separate personal property:				
G. Divis	ion of real estate				
	ach parcel of real estate you own, provi h a separate sheet for each additional p				
	Ownership of real estate Theck one				
а	<i>'</i>				
b	. Vive own real estate located a	Street address			
	in the City of	, County of	, and		
	State of	This land is described in the deed as follows	3:		
. ,	he real estate shall be: Theck one				
а	 Sold and the profit or debt di to Respondent. 	vided% to Petitioner and%			
b	Awarded to Petitioner, subject	ct to all liens and mortgages.			
С	. Awarded to Respondent, sub	oject to all liens and mortgages.			
d	Other Explain				
(3) A	dditional real estate Check this box if you are attaching:	separate sheets for additional parcels of real estate.			
H. Divis	ion of debts				
Check	t one				
(1)	There are no debts.				
(2)	We have listed all the debts that Attach additional sheets if necessary	we know about and ask that they be divided as v.	follows:		

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

a. Petitioner will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

b. Respondent will pay the following debts:

Month

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.

c. For any debt we do not know about, the spouse who made the debt will pay that debt.

I. Cash payment

۱۸	ما	as	b	th	at
V١	ıe.	as	κ	LI	เลเ

Check one

ey to the other.
to equalize the division of property
20 <i>Year</i>
to equalize the division of property

Continued on next page

 \overline{Day}

 $Rule\ 17.100 - Form\ 128: \textit{Settlement Agreement for a Dissolution of Marriage with no \textit{Minor or Dependent Adult Children}, continued to the property of th$

J.	Spousal support (alimony)							
	Check one We ask that:							
	(1) Neither Petitioner nor Respondent pay sp	oueal support (alimony) to the other						
	(2) Petitioner pay spousar support (allimorry)	(2) Petitioner pay spousal support (alimony) to Respondent as follows:						
	(3) Respondent pay spousal support (alimony) to Petitioner as follows:							
k	Name change							
IX.	Check one							
	We ask that							
	(1) Petitioner's name							
	a. Not be changed.							
	b. Be changed to:	Name can only be changed to						
		name on birth certificate or name used immediately prior to the marriage.						
	Print Petitioner's former or birth name	_ immediately prior to the marriage.						
	(2) Respondent's name							
	a. Not be changed.							
	b. O Be changed to:	Name can only be changed to name on birth certificate or name used						
	Print Respondent's former or birth name	immediately prior to the marriage.						
L.	Court fees							
	Check one							
	(1) Petitioner will pay all court fees.							
	(2) Respondent will pay all court fees.							
	(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.							
	(4) Petitioner and Respondent shall each pay	one-half of the total court fees.						
	We ask that (1) Petitioner will pay all court fees. (2) Respondent will pay all court fees. (3) Petitioner and Respondent shall each pay							

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued

M.	Attorney's fees					
	(1) Petitioner's attorney's fees					
	Check one					
	a. O Petiti	oner has no attorney's fees.				
	b. O Petiti	oner will pay Petitioner's attorney's fees.				
	c. O Resp	ondent will pay \$	for Petitioner's attorney's fees.			
	(2) Respondent's	attorney's fees				
	Check one					
	a. O Resp	ondent has no attorney's fees.				
	b. O Resp	ondent will pay Respondent's attorney's fee	es.			
	c. O Petiti	oner will pay \$	for Respondent's attorney's fees.			
N.	Necessary docu	iments				
	We will sign and Settlement Agree	promptly deliver to each other any papers the ment.	nat may be needed to carry out this			
Ο.	Other agreeme	ents				
	Attach additional s	heets if necessary				

4.

3.		torney Help eck one						
		Petitioner						
		(1) An attorney did not	help me prepare or	r fill in this paper.				
		(2) An attorney helped me prepare or fill in this paper.						
		If you check (2), you						
		Name of attorney or organ	nization, if any	Attorney's P.I.N.	# - Ask the attorn	ney		
		Business address of attorn	_	City	State	ZIP code		
		() Attorney's phone number	() _ Attorney's fas	v mumher entional	Attorney's amo	uil address antiqual		
	В.	Respondent	Attorney s jus	х нитовт – орнона	Allorney s emo	пі асан езз – орнови		
		(1) An attorney did not	help me prepare or	r fill in this paper.				
		(2) An attorney helped						
		If you check (2), you						
		Name of attorney or organ	nization, if any	Attorney's P.I.N.	# – Ask the attor	nev		
		Business address of attorn	ney or organization	City	State	ZIP code		
		() Attorney's phone number		x number – optional	444	nil address – optional		
	_		Attorney s Ja:	x number – optional	Attorney s ema	tti aaaress – optional		
4.		aths and Signatures is Settlement Agreement addre	seese all issues in ou	ır diyorce Me hayı	e made a full disc	losure of our		
		perty and debts to each other.						
	fina	al Decree.				·		
	A.	Petitioner's Oath and Signa	ture					
	I,, certify under penalty of perjury and pursuant to the Print your name							
	laws of the State of lowa that I have read this Settlement Agreement and it accurately states how I would							
	like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be							
		presented to a judge for approv		_	nis Settlement Agr	eement be		
			, 20					
		Month Day	Year	Petitioner's signo	iture*			
		Mailing address	City	,	State	ZIP code		
		()						
		Phone number	Email address		dditional email ac	-		
	* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.							
		,,		d on next page				
				1 0				

Rule 17.100—Form 128: Settlement Agreement for a Dissolution of Marriage with no Minor or Dependent Adult Children, continued B. Respondent's Oath and Signature , certify under penalty of perjury and pursuant to the Print your name laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in my divorce. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. Month Respondent's signature* Mailing address City ZIP code State Email address Additional email address - if available

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rules 17.101 to 17.199 Reserved.

Rule 17.200 Family law forms for dissolution of marriage with dependent children. The following forms are for use in dissolution of marriage (divorce) actions with children under the age of 18 who are children of both spouses to the marriage, or children under the age of 18 who were adopted or born during the marriage, or children 18 years of age or older who are children of both spouses to the marriage and are dependent or still need support. These forms must also be used if a spouse of the marriage is pregnant.

Form 201: Petition for Dissolution of Marriage with Children

Form 202: Petition Cover Sheet for a Dissolution of Marriage with Children

Form 203: Confidential Information Form

Form 204: Original Notice for Personal Service
Form 204a: Original Notice for Personal Service

Form 205: Acceptance of Service

Form 206: Directions for Service of Original Notice
Form 207: Motion and Affidavit to Serve by Publication

Form 208: Original Notice by Publication

Form 209: Application and Affidavit to Defer Payment of Costs

Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of

Marriage

Form 211: Protected Information Disclosure
Form 212: Joint Statement on Legal Parent
Form 213: Motion to Disestablish Legal Parent

Form 214: Reserved

Form 215: Answer to Petition for Dissolution of Marriage with Children

Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Forms 217 to 220: Reserved

Form 221: Affidavit for Temporary Custody and Visitation
Form 222: Motion in a Dissolution of Marriage with Children

Form 223: Response to a Motion

Form 224: Financial Affidavit for a Dissolution of Marriage with Children

Form 225: Affidavit of Mailing Notice

Form 226: Notice of Intent to File Written Application for Default Decree

Form 227: Request for Relief in a Dissolution of Marriage with Children

Form 228: Settlement Agreement for a Dissolution of Marriage with Children

Form 229: Agreed Parenting Plan
Form 230: Proposed Parenting Plan

Forms 231 to 300: Reserved

[Court Order December 19, 2013; March 26, 2014]

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children

Read the Guide to Representing Yourself in an Iowa Divorce Case with Children on the Iowa Judicial Branch website before using this form.

Petitioner: Use this form only if your spouse lives in Iowa or you have lived in Iowa for the last year before you file the Petition, and one or more of the following are true:

- There are children under age 18 who are children of both Petitioner and Respondent.
- There are children under age 18 who were born or adopted during this marriage.
- There are children over age 18 who still need support.
- A spouse is pregnant.

Do not use this form if all of these are true (instead, use form 201):

- You and your spouse do not have children under age 18.
- . You and your spouse do not have children age 18 or over who still need support.
- · A spouse is not pregnant.

	In the Iowa District Court fo				County
In Re	the Marriage of:	County	v where you are fi	ling this Petition	
Your c	urrent legal name		Your spouse's	current legal name	
Upoı	the Petition of				
			For clerk's use on	'y	
Petitioner Full name: first, middle, last The spouse who files the Petition and concerning			Petition for Dissolution of Marriage with Children		
	ondent Full name: first, middle, last				
The othe	r spouse ersonal Information Fill in all in	nformation	that you know. If	you have been assa	ulted by your sp
The othe	r spouse ersonal Information Fill in all in d you fear for your safety, you may leave				
The other	ersonal Information Fill in all in	e your stree	residence:		
The other	ersonal Information Fill in all in ad you fear for your safety, you may leave	e your stree	residence:	number, and email	
The other	ersonal Information Fill in all in dyou fear for your safety, you may leave. Petitioner's (your) birth year and	e your streed d present City	residence:	number, and email hyear	blank. ZIP code

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

				sent residence: _	Birth ye	\overline{ar}
	Daniel Just	1.1	C:t.		744.	ZIP code
	Respondent's present stree	et address	City	λ.	State	ZIP code
	County		Phone number	The state of the s	Email ac	ldress
C.	Other person, if any, v Fill in as much information			dy rights of the pa	rties' d	children:
	Full name: first, middle, la	ust				
	Present street address		City	<u> </u>	State	ZIP code
	County		() Phone number		Email ac	Idvass
				•		
Ge	eneral Information A	bout the I	Marriage and	the Parties		
Α.	Date and location of th	ne marriage				
		•				
	Month D	ay Year	City		St	tate
В.	Children					
	Check all that are true					
	• •	-		en of both Petitione		•
	(2) There are children This includes any	en under age	e 18 who were a	en of both Petitione dopted or born duri he marriage, but for t	ng this	marriage.
	(2) There are childred This includes any a parent.	en under age child born to	e 18 who were ac a spouse during th	dopted or born duri he marriage, but for t	ng this	marriage.
	(2) There are children This includes any a parent. (3) There are children are chil	en under age child born to en 18 years o	e 18 who were ac a spouse during the or older who still	dopted or born duri he marriage, but for t	ng this	marriage.
C	(2) ☐ There are childred This includes any a parent. (3) ☐ There are childred (4) ☐ Petitioner or Research.	en under age child born to en 18 years o spondent is p	e 18 who were ac a spouse during the or older who still	dopted or born duri he marriage, but for t	ng this	marriage.
C.	(2) There are childred This includes any a parent. (3) There are childred This includes any a parent. (4) Petitioner or Residentification of childred This includes any a parent.	en under age child born to en 18 years o spondent is p	e 18 who were ac a spouse during the or older who still	dopted or born duri the marriage, but for to need support.	ng this whom th	marriage.
C.	(2) ☐ There are childred This includes any a parent. (3) ☐ There are childred (4) ☐ Petitioner or Research.	en under age child born to en 18 years o spondent is p	e 18 who were ace a spouse during the proof of the proof of the pregnant.	dopted or born duri he marriage, but for t	ng this whom th	marriage. se other spouse i
C.	 (2) ☐ There are children This includes any a parent. (3) ☐ There are children (4) ☐ Petitioner or Residentification of children First, middle, & last 	en under age child born to en 18 years o spondent is pen	e 18 who were ace a spouse during the proof of the proof of the pregnant.	dopted or born during marriage, but for the marriage and the meed support. First, middle, & I	ng this whom th	marriage.
C.	(2) ☐ There are children This includes any a parent. (3) ☐ There are children (4) ☐ Petitioner or Residentification of children First, middle, & last initials of each child	en under age child born to en 18 years o spondent is pen	e 18 who were ace a spouse during the proof of the proof of the pregnant.	dopted or born during marriage, but for the marriage, but for the meed support. First, middle, & I initials of each contact the middle in the	ng this whom th	marriage. se other spouse i
C.	(2) There are children This includes any a parent. (3) There are children the children of the children of children of children the children of children the children of children the children of children of children the children of child	en under age child born to en 18 years o spondent is pen	e 18 who were ace a spouse during the proof of the proof of the pregnant.	dopted or born during marriage, but for the marriage, but for the meed support. First, middle, & I initials of each contact (4)	ng this whom th	marriage. se other spouse i
C.	(2) There are childred This includes any a parent. (3) There are childred This includes any a parent. (4) Petitioner or Residentification of childred This includes any a parent. (4) Petitioner or Residentification of childred This includes a last initials of each child (1) (2)	en under age child born to en 18 years o spondent is p en Birth yea	e 18 who were ac a spouse during the or older who still pregnant.	dopted or born during marriage, but for the marriage, but for the marriage of	ng this whom th ast hild	marriage. se other spouse i
	(2) There are childred This includes any a parent. (3) There are childred This includes any a parent. (4) Petitioner or Residentification of childred This includes the second thing the second this initials of each child (1) (2) (3) Check this box if you have	en under age child born to en 18 years o spondent is p en Birth yea	e 18 who were ac a spouse during the or older who still pregnant.	dopted or born during marriage, but for the marriage, but for the marriage of	ng this whom th ast hild	marriage. se other spouse i
	(2) There are childred This includes any a parent. (3) There are childred This includes any a parent. (4) Petitioner or Residentification of childred This includes and the second This initials of each child (1) (2) (3)	en under age child born to en 18 years o spondent is p en Birth yea chave attached gements en have lived	e 18 who were ace a spouse during the process of the pregnant. ar a separate sheet last file during the last file.	dopted or born during marriage, but for the marriage, but for the marriage and the point of the marriage and	ng this whom the ast hild dren.	marriage. se other spouse in the spouse in
	(2) There are children This includes any a parent. (3) There are children the children of t	en under age child born to en 18 years o spondent is p en Birth yea chave attached gements en have lived	e 18 who were ace a spouse during the process of the pregnant. ar a separate sheet last file during the last file.	dopted or born during marriage, but for the marriage, but for the marriage and the point of the marriage and	ng this whom the ast hild dren.	marriage. se other spouse in the spouse in

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued Lived with Adult name State City (2) Children: Initials Initials Initials Initials Initials Lived with Adult name mm уууу State (3) Children: Initials Initials Initials Initials Initials Lived with Adult name State City (4) Children: Initials Initials Initials Initials Initials Lived with Adult name mmCity State (5) Children: <u>Initials</u> Initials Initials Initials Initials Lived with from Adult name dd mm mmyyyy State ☐ Check this box if you have attached a separate sheet listing additional children. If the children have been in Iowa for less than six months, you may be able to get a divorce, but you might not be able to get custody. The rules are complicated and you may need to talk to an attorney. E. Petitioner's residence You cannot get a divorce in Iowa if your spouse does not live in Iowa and you have lived in Iowa for less than one year, or if you came to live in Iowa just to get a divorce. If you do not live in Iowa, you can only get a divorce in Iowa if your spouse lives in Iowa. If you have questions about this, talk to an attorney. (1) The only reason that Petitioner (you are Petitioner) is living in Iowa is just to get a divorce. True If you do not live in Iowa, or if you live in Iowa for reasons other than just to get a divorce, check "False."

3.

Rule	17.2	00—Form	201:	Petition for	Dissolution (of Marriage	with Children,	continued			
		(2) Pe	titio	ner has li	ved in lo	wa for the	last	years	and	months	
		in .				(county.				
		,					ount the tin				
		• <i>1</i>	fyoi	ı have bee	ı a resider	it of anothe	r state, cou	nt the time	since you lo	ast moved to Iowa	•
	F.	Partie	s' re	esidence							
		divorce	in I	owa.		lowa, you	must have l	lived in Iov	wa for the l	last year before y	ou may obtain a
				that is tri							
		(1)	Pe	titioner h	as lived i	n Iowa fo	r more tha	n one yea	ar.		
		(2)	Re	esponder	t (your s	oouse) is	a resident	of lowa.			
	G.	Condi	tion	of the n	narriage						
		Check o	all th	at are tru	е						
		(1)	Th	e marria	ge is brol	ken and c	annot be s	saved.			
		(2)			-	-	going on ir in 4. You s	_		-	
		(3)	Th	is Petitio	n is being	g filed in g	ood faith f	for the pu	rpose of e	ending the marri	iage.
		(4)	Со	unseling	will not sa	ave the ma	arriage. If	counseling	may save ti	he marriage, do n	ot check (4).
	Н.	•		ent's sta							
		(1)	Re	sponder	t (your s	oouse) is	in the milit	ary servic	e.		
							l rules that ould talk to			se from going fo	rward if your
		(2)	Re	esponder	t is in pri	son or jail	at				in
								f facility			State
	I.	Check of		or no c	ontact o	rder					
		(1)		ere is ne esponder	•		order" nor	a "no cor	ntact order	" between Petit	tioner (you) and
		(2)					r a "no coi ing informa		er" betwee	n Petitioner and	d Respondent.
			a.	County	and state	where the	order came	from:			
								Coi	ınty		State
_			b.		se numbe						
3.		her Ca eck A or		s Abou	t the C	hildren					
	A.	O Th	ere	are no	other cas	ses abou	t the child	dren. <i>If y</i>	ou check I	A, skip to 4.	
	B.	If there	is aı	n order fro	m out of	state about		en, an Iowa		y not be able to is	
		about c	usto	dy or visit	ation. Th	e rules are	complicate	ed and you	may need	to talk to an attor	rney.

Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued

If you check B, fill in the applicable information below. (1) Juvenile court Check a or b.) There is no juvenile court case. There is a juvenile court case. If you check b, fill in the following information: County and state of the juvenile court case: County State Juvenile court case number: Check one Concurrent jurisdiction has been granted. Concurrent jurisdiction has not been granted. If the juvenile court has not given concurrent jurisdiction (permission), then child custody cannot be decided in this case. You should talk to an attorney. (2) Custody order You might not be able to get custody in Iowa if there is a custody order entered in another state. Check a or b. There is no custody order. There is a custody order. If you check b, fill in the following information: County and state where the custody order came from: County State ii. Court case number: (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: **4.** Other Information All of the basic information you need to tell the court is listed on this form. Provide other information only if you need to explain something. 5. Petitioner's Request A. Petitioner asks the court to: Check all that apply. The court will only consider items that are checked. (1) End the marriage of Petitioner (you) and Respondent (your spouse) December 2013 Rule 17.200-Form 201 Page 5 of 7

Rule 17.200—Form 2	201: Petition for Dissolution of Marriage with Children,	continued				
(2)	Decide custody and visitation.					
(3)	Order child support and medical support.					
(4)	Order payment of school or college tuition.					
(5)	Fairly divide the property and the debts of the parties.					
(6)	Order that Respondent pay the court fees.					
(7)	Order that Respondent pay for Petitioner's attorney's fees before the divorce is final. If you check (7), you must file form 222.					
(8)	Order that Respondent pay spousal support (alimony) to Petitioner. If you check (8), you must file form 222.					
(9)	Change Petitioner's last name to:	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.				
	Print your former or birth name					
(10)	Order counseling to save the marriage.					
(11)	Other request:					

Continued on next page

6. Attorney Help

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children, continued

	Check one					
	A. An attorney	did not help	me prepare o	or fill in this paper		
			-	in this paper.		
	If you check B,	you must fill ir	n the following i	information:		
	N. C. II				((4 1 1 1	
	Name of attorn	ey or organiza	tion, if any	Attorney's P.I.N.	# - Ask the attorne	Py
	- Business addre	ess of attorney o	or organization	- City	State	ZIP code
	() Attorney's pho	ne number	(Attorney's f) fax number – optional	Attorney's email	l address – optiona
7						
1.	Service Instruction If Petitioner is filing					
	Check one	пі рареі,				
	A. Petitioner wi	ll accept ser	vice of docur	nents at the attorr	nev's address lis	ted above: or
	\sim				,	
	B () Petitioner wil	Laccept servi	ice of docume	ents in this case at	the mailing addr	ess below
	•	-	ice of docume	ents in this case at	the mailing addr	ess below.
8.	Oath and Signatu	-	ice of docume	ents in this case at	the mailing addr	ess below.
8.	Oath and Signatu	-		ents in this case at ve read this Petiti		
8.	Oath and Signatu	ıre	, ha	ve read this Petiti	on, and I certify	under penalty
8.	Oath and Signatu I,	ure	, ha	ve read this Petiti	on, and I certify	under penalty
8.	Oath and Signatu	ant to the la	, ha ws of the Sta xt.	ve read this Petition	on, and I certify	under penalty
8.	Oath and Signatu I,	ant to the la	, ha ws of the Sta xt.	ve read this Petiti	on, and I certify	under penalty
8.	Oath and Signatu I, Print your name of perjury and pursuin this Petition is tru	ant to the la	, ha	ve read this Petition	on, and I certify	under penalty
8.	Oath and Signatu I, Print your name of perjury and pursuin this Petition is tru	ant to the la	, ha ws of the Sta xt. , 20	ve read this Petition	on, and I certify	under penalty
8.	Oath and Signatu I, Print your name of perjury and pursuin this Petition is tru Signed on: Month	ant to the late and correct Day	, ha ws of the Sta ct. , 20	we read this Petition to $\overline{Your\ signature}^*$	on, and I certify i	under penalty ave provided
8.	Oath and Signatu I, Print your name of perjury and pursuin this Petition is tru Signed on: Month	ant to the late and correct Day	, ha ws of the Sta xt. , 20	ve read this Petition to of lower that the Your signature*	on, and I certify i	under penalty ave provided
8.	Oath and Signatu I,	ant to the late and correct Day	ws of the Statt, 20 Year il address	ve read this Petition to of lower that the Your signature*	on, and I certify to information I have a state.	under penalty ave provided ZIP code ss, if applicable
8.	Oath and Signatu I, Print your name of perjury and pursuin this Petition is tru Signed on: Month	ant to the late and correct Day Email	ws of the Statt, 20 Year il address	ve read this Petition to of lower that the Your signature*	on, and I certify to information I have a state.	under penalty ave provided ZIP code ss, if applicable
8.	Oath and Signatu I,	ant to the late and correct Day Email	ws of the Statt, 20 Year il address	ve read this Petition to of lower that the Your signature*	on, and I certify to information I have a state.	under penalty ave provided ZIP code ss, if applicable

Important Notice to Petitioner
See next page for instructions for filing a Petition.

Rule 17.200—Form 201: Petition for Dissolution of Marriage with Children

Do not file these instructions

Instructions for Filing a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Petition electronically

- If you are filing your divorce case in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling</u> on the Iowa Judicial Branch website.
- After you have registered, <u>log in to the electronic filing system</u> to electronically file your dissolution case.
- For help electronically filing your divorce, see <u>How to eFile a New Case</u>.
- With your Petition, you must also file an Original Notice (204) and a Protected Information Disclosure Form (211).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling
 of your Petition and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Petition and Original Notice so that you can serve it on (deliver it to) your spouse.
- For help finding and downloading your Petition and Original Notice, please see <u>My Filings Reference</u> <u>Guide</u>.

Filing your Petition in paper

- If the county where you will be filing your Petition does not yet accept electronic filing, you may
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Petition (201), you must also file a Petition Cover Sheet (202), an Original Notice (204a), and a Confidential Information Form (203).
- Forms 201 and 204a: Make two photocopies if you can deliver copies of these forms to your spouse inperson or by mail. Make three photocopies if you are going to ask the county sheriff or a civil process server to deliver these forms to your spouse.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 202 and 203: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a divorce.

Instructions for Rule 17.200-Form 201: Petition for Dissolution of Marriage with Children, continued

- Give the clerk at the counter these forms:
 - 201 Petition for Dissolution of Marriage with Children
 - 202 Coversheet for a Petition for Dissolution of Marriage with Children
 - 203 Confidential Information Form (Do not make copies of this form.)
 - 204a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 209.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (204a). You will have to serve this form on (deliver it to) your spouse.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.200—Form 202: Petition Cover Sheet for a Dissolution of Marriage with Children

For court use only Case m	umber	County where case is fil	ed	_
Petitioner				
Petitioner's first name	Middle name	Last name		_
Street address		City	State	ZIP code
() Phone number	Email add	ress		
Case name				
Petitioner's first name	Middle name	Last name		_
VS.				
Respondent's first nam	e Middle name	Last name		_

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the clerk of court when filing a Petition for Dissolution of Marriage with Children (201).
- . Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- Electronic filers: Do not use this form. The information on this form is automatically generated when you submit your documents electronically.

Rule 17.200—Form 203: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the lowa District Court for _	County where your case is filed		
Jpc	on the Petition of	Equity case r	10	
Peti	itioner Full name: first, middle, last souse who files the Petition	Confide	ential Information Form	
nd	concerning			
	spondent Full name: first, middle, last her spouse			
. 1	Petitioner's Information			
Ī	Full name: first, middle, last	Birth date	Social Security number	
. 1	Respondent's Information			
Ī	Full name: first, middle, last	Birth date	Social Security number	
. (Children's Information			
(Child 1:			
Ī	Full name: first, middle, last	// Birth date	Social Security number	
(Child 2:	, , ,		
Ī	Full name: first, middle, last	Birth date	Social Security number	
(Child 3:			
Ī	Full name: first, middle, last	Birth date	Social Security number	
(Child 4:			
		/ /	Social Security number	

Full name: first, middle, last	Birth date	Social Security number
	ttached a separate sheet listing addi	_
Signature of Provider o	f Information	
Information provided by: _		
P	rint your full name: first, middle, la	st
		, 20
Your signature	Month	Day Year

Rule 17.200—Form 204: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition.

Failure to meet this deadline may result in the court dismissing the divorce case.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website for additional important instructions. Iowa divorce forms are available free of charge on the <u>Iowa Judical Branch website</u>.

- If filing electronically, Petitioner must complete this form.
- If filing in paper, Petitioner must use form 204a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Cour	t for	County where Pet	ition is filed	County
Upon the Petition of		Original No	otice for Pe	ersonal Service
Petitioner Full name: first, middle	e, last			
and concerning				
Respondent Full name: first, n	niddle, last			
 To Respondent Named Abore Petitioner (your spouse A copy of the Petition for Petitioner asks for a div Petitioner's contact in) has filed a divorce la or Dissolution of Marri orce.	age with Children		
i ettioner 3 contact ii	normation during th	e divorce case.	Petitioner's n	ате
Mailing address	City		State	ZIP code
Phone number	Email addres	TS .		

Important instructions for Respondent on next page

Rule 17.200—Form 204: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition.
- B. For help in your divorce case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Petition form 201, you may use Answer form 215.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing (NEF) will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent
You should talk to an attorney at once to protect your interests.

County Courthouse

ZIP code

lowa

Rule 17.200—Form 204a: Original Notice for Personal Service

Petitioner: Use this form only if filing in paper. Read the Guide to Representing Yourself in an Iowa Divorce Case with Children for additional important instructions. Iowa divorce forms are available free of charge on the Iowa Judicial Branch website. If filing electronically, Petitioner must use form 204. If filing in paper, Petitioner must use this form. If you do not understand how to use this form, or if you should use this form, talk to an attorney. County In the Iowa District Court for County where Petition is filed **Upon the Petition of** Equity case no. **Original Notice for Personal Service** Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last 1. To Respondent Named Above Petitioner (your spouse) has filed a divorce lawsuit naming you as Respondent. A copy of the Petition for Dissolution of Marriage with Children is attached to this Notice. Petitioner asks for a divorce. Petitioner's contact information during the divorce case: Petitioner's name ZIP code Mailing address City State Email address 2. Instructions to Respondent Named Above You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asked for in the Petition. If you received Petition form 201, you may use Answer form 215. After you file your Answer or Motion, you must serve a copy of it on Petitioner. (SEAL) Clerk of Court

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (____) ______Persons who are hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice**. Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

City

December 2013 Rule 17.200—Form 204a Page 1 of 1

[Court Order December 19, 2013]

Important Notice to RespondentYou should talk to an attorney at once to

protect your interests.

Rule 17.200—Form 205: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for	County where Petition is filed	Co	unty
Ipon the Petition of	Equity case no		
etitioner Full name: first, middle, last	_ Acceptance	of Servi	ce
,			
nd concerning			
	_		
Respondent Full name: first, middle, last			
etitioner must file this form with the clerk of court so	on after Respondent signs it.		
community in a second of court sec	The second second second second		
Respondent must complete this section:			
Respondent's Acceptance of Service, (Oath, and Signature		
f Respondent completes this Acceptance of Service, Re	spondent must return this form to	Petitioner :	soon after
igning it. Petitioner will file it with the clerk of court.			
,	_, am Respondent in this ca	se. I rece	ived a cop
Print your name	and the same at the Area		0 :
f the Original Notice and the Petition for this certify under penalty of perjury and pursuant		-	
nformation I have provided in this Acceptance			
Signed: Month Day Year	Respondent's signature		
,	, 0		
Respondent's mailing address	City	State	ZIP code
,			
Phone number Email address			
	tice to Respondent		
By signing this form, you are n You are only agreeing that you receive			otition

Rule 17.200—Form 206: Directions for Service of Original Notice

Petitioner: Complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

- Do not use this form if Respondent has already received the Petition and Original Notice.
- Do not file this form with the clerk of court in paper or electronically.
- Give this form to the sheriff or other process server with your Petition (201) and Original Notice (204 if electronically filing or 204a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

County where Petition is filed	Equity case number		
	heriff or Other Process Serve	er	
A. Sheriff In county where	Respondent will be servedCounty		
Street address	City	State	ZIP code
B. Other process server Name of other person serv			
Street address	City	State	ZIP code
2. Person to be Served	()		
Your spouse 's name	Phone number		
Address where your spouse can be 3. Person Requesting Serv	•	State	ZIP code
Your name	Phone number		
Your present mailing address	City	State	ZIP code
4. Special Instructions for State delivering papers to Respondent.	Service Provide information that wi	ll help the sheriff o	r process server i

5. Costs of Service

Rule 17.200—Form 206: Directions for Service of Original Notice, continued

Check one	
A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 209.	or other process server.
B. Costs for Sheriff deferred by court order:	
,	Clerk of court: Sign only if costs deferred by court order
Notification	-,
After completion of service, the sheriff or other pro- requesting service.	cess server will notify the person
, 20	
Signed: Month Day Year	Your signature
	A. O Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 209. B. O Costs for Sheriff deferred by court order: Notification After completion of service, the sheriff or other proceeding service.

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where your spouse lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition
- Ask if the newspaper will publish your Original Notice by Publication (208) in your divorce case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court for	County where you file	d the Petition	County
Upor	n the Petition of		no.	
Petiti	ioner Full name: first, middle, last		tion and Affiderve by Public	
and c	oncerning			
Resp	ondent Full name: first, middle, last			
A.	Respondent's residence Check each that applies (1) Respondent lives outside of (2) Respondent's residence and		unknown.	
В.	Respondent's last known resider	nce:		
В.	Respondent's last known resider Street address	nce: - City	State	ZIP code
В.		_	State Email a	
	Street address County Most recent date Respondent is	City () Phone number	Email a	ddress

Rule	17.2	200—Form 207: Motion and Affidavit to Serve by Publication, continued
	D.	Petitioner has taken these steps to find Respondent:
	E.	Petitioner will publish notice in this newspaper:
		Name of newspaper
	F.	Petitioner asks the court to allow Petitioner to serve Respondent by publication because
		Respondent cannot be personally served.

Continued on next page

2. Attorney Help

Rule 17.200—Form 207: Motion and Affidavit to Serve by Publication, continued

B. () A	n attorney he						
If.	you check B, yo	ou must fill in	the following	information:			
\overline{N}	ame of attorney	or organizati	ion, if any	Attorney's P.I.	N. # -Ask the	attorney	
\overline{Bi}	usiness address	of attorney o	r organization	City		State	ZIP cod
(_)		_ () fax number – optiona			
At	ttornev's nhone	numher	Attornon's	far number entione	i Attornov	's amail a	ddress – opti
	norriey s priorie	7111111001	Allorney s	их нитоет – ориона	Anorney	s eman a	
Oath an	d Signature		Auorney s	их нитоет – орнона	Аногнеу	s emaii a	op.
Oath an		e					
Oath an	d Signature	e		ve read this Mot			
I, Print you	d Signature	e	, ha		ion and Affi	ida∨it, ar	nd I certify
I,under pe	d Signature or name nalty of perju	ry and purs	, ha suant to the Affidavit is t	ve read this Mot	ion and Affi e of Iowa th	ida∨it, ar	nd I certify
I,	d Signature ur name nalty of perju vided in this I	ry and purs	, ha suant to the Affidavit is t	ve read this Mot laws of the State true and correct	ion and Affi	ida∨it, ar	nd I certify
I,under pe	d Signature ur name nalty of perju vided in this I	ry and purs	, ha	ve read this Mot	ion and Affi	ida∨it, ar	nd I certify
I,	d Signature ur name nalty of perju vided in this I Month	ry and purs	, ha suant to the Affidavit is t _, 20	ve read this Mot laws of the State true and correct	ion and Affi e of lowa that	ida∨it, ar	nd I certify
Print you under pe have prov	d Signature ur name nalty of perju vided in this I Month	ry and purs Motion and - Day	, ha suant to the Affidavit is t _, 20	ve read this Motate laws of the State true and correct. Your signature	ion and Affi e of lowa that	davit, ar	nd I certify formation

Rule 17.200—Form 208: Original Notice by Publication

Petitioner: Complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Newspaper: Publish only the information below this line.

	In the Iowa District Court for	County where Petition is j	filed	County
U	pon the Petition of	Equity case no		
Pe	etitioner Full name: first, middle, last	Original Noti	ce by P	ublication
	nd concerning			
Re	espondent Full name: first, middle, last	_		
1.	 Information for Respondent Named Abo Petitioner (your spouse) has filed a divorce law Petitioner's contact information during the divorce 	wsuit naming you as Responde	nt.	
	Petitioner's name: First, middle, last		-	
	Petitioner's present street address Ci		State	ZIP code
	County (_Ph	none number	Email a	ddress
2.	Respondent's Deadline for Filing a Reyou must file an Answer or a Motion with the	•	ounty with	nin 20 days after
3.	You must file an Answer or a Motion with the cle provided above. If you do not respond, the court she asked for in the Petition.	erk of court in the above county		
	You should talk to an attorney at once to protect your If you choose not to have an attorney represent you in self-represented litigant information and family law for	n this matter, go to the Iowa Judicial	Branch wel	osite for
If yo hea con	ou need assistance to participate in court due to a disability, contac rring or speech impaired may call Relay lowa TTY (1-800-735-2942 ttact information available at: http://www.iowacourts.gov/Administra	et the disability coordinator at: () 2). Disability coordinators cannot prov tion/Directories/ADA_Access/.	ride legal adv	Persons who are rice. Disability coordinator

Rule 17.200-Form 208: Original Notice by Publication, continued

Newspaper: only publish the instructions below if your county uses electronic filing. To determine if your county uses electronic filing, check the map available on the Iowa Judicial Branch website under "eFiling," or call the clerk of court office in your county.

Additional Information for Respondent

- You must register to eFile through the Iowa Judicial Branch website at
 https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court.
- For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
- For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs

Petitioner: Use this form only if you cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be waived. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for	County where your case is filed
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Application and Affidavit to Defer Payment of Costs
and concerning	
Respondent Full name: first, middle, last	_
 Request and Information I am Petitioner. For my Application and Affidavit, I standard and I standard apply I am unable to pay the filling fee of the court for permission to precede the court for permission to precede the court for permission and Affidation and Affidati	or service costs or other court costs. proceed without prepayment of costs and fees. fidavit in good faith. m asking for in this case.
E. My income comes from:	per month. Its before deductions for all members of your household. Its before deductions for all members of your household. Its before deductions for all members of your household.
Cont	inued on next page

Rule 17.200—Fc	orm 209: Application and	l Affidavit to Defer Paym	nent of Costs, continued

F.	My household has the following monthly expenses:				
	(1) Rent or mortgage	\$			
	(2) Utilities	\$			
	(3) Phone	\$			
	(4) Food	\$			
	(5) Transportation	\$			
G.	I have \$	in cash, checking, and savings.			

Continued on next page

Rule 17.200—Form 209: Application and Affidavit to Defer Payment of Costs, continued

2.	Attorney Help				
	Check one				
	A. An attorney did not help				
	B. An attorney helped me p	-			
	If you check B, you must fill i	n the following in	nformation:		
	Name of attorney or organiza	ation if ann	Attornov's D.I.M	# Ask the attorn	an .
	ivame of altorney or organiza	ition, ij uny	Attorney ST.1.1v.	# -Ask the attorn	ey
	Business address of attorney	or organization	City	State	ZIP code
	()	_ ()			
	() Attorney's phone number	Attorney's fo	x number – optional	Attorney's emai	l address – optional
3.	Certification of Service by	Mailing or D	elivery		
	Section 3 to be completed only if filing				filing.
	This document, if filed electronically,		_	_	
	I, Print your name	, cer	tify that on		, 20
	I mailed or gave a copy of this App				
	Name of person to whom I delivered of Party's or attorney's mailing address	r mailed it City	v	State	 ZIP code
4.		,			
₹.	Jama Signature	oortifi (unde	r nanalh (af nariur	v and nursuant	to the love of
	l,Print your name	, certify dride	r penalty of perjui	y and pursuant	o the laws of
	the State of Iowa that I have read				
	provided in this Application and A	Affidavit is true	and correct.		
	. 2	20			
	Signed on: Month Day	$\frac{20}{Year}$ ${You}$	ır signature*		
	Mailing address	City	v	State	ZIP code
	(
	Phone number Ema	il address	Add	itional email addre	2SS – if available
	* Whether filing electronically or in paper scan the form after signing it and then fi		ite your signature on t	ais form. If you are f	iling electronically,
Dec	cember 2013	Rule 17.20	0—Form 209		Page 3 of 3

Rule 17.200—Form 210: Affidavit of Service of Original Notice and Petition for Dissolution of Marriage

Petitioner: Use this form only if someone other than Petitioner (you), or a person who is not a sheriff or a process server, delivered a copy of the Petition and Original Notice to Respondent (your spouse).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa Distric	t Court for	County where Pe	etition is filed	c	ounty
Up	on the Petition of		Equity ca			
Pet	titioner Full name: first, middle	; last	1	lavit of Serv Notice and I Dissolution	Petitio	n for
and	concerning				oa.	···ugo
Re	spondent Full name: first, n	niddle, last	_			
1.	Affidavit					
	l,		, delivered a	copy of the C	Driginal	Notice and
	Name of person – Cannot	be Petitioner, sheriff	, or process server		•	
	Petition for Dissolution of	f Marriage for th	is case to:			Check one Oa.m.
		on	$\frac{1}{ath}$ $\frac{1}{D}$, 20	at	Ор.т.
	Name of Respondent	Mon	nth D	ay Year	r Tii	ne
	by handing Respondent	copies of the att	ached papers.			
2.	Oath and Signature To be completed by the person	n who gave the Peti.	tion and Original N	otice to Respond	lent.	
	l,		, have read t	this Affidavit o	f Servi	ce, and I certify
	Print your name					
	under penalty of perjury a have provided in this Affi	davit of Service	is true and corre	ct.	that the	information I
	<u> </u>	, 20	Your signature*			
	Signed on: Month Da	y 1ear	Tour signature *			
	Mailing address		City		State	ZIP code
	() Phone number	Email address		Additional en	nail addi	ress – if available
	* If you are filing electronically,	scan the form after si	igning it and then file	electronically.		
Dece	ember 2013	Rule	17.200—Form 210			Page 1 of 1

[Court Order December 19, 2013]

Rule 17.200—Form 211: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (211) and file it with the Petition (201) and Original Notice (204).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 211 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where the case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Protected Information Disclosure
and concerning	
Respondent Full name: first, middle, last	_

For electronic filers:

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The spouse who filed for divorce.

Provide the complete version of protected information and the redacted version included in documents you file.

Name

First \overline{Middle} Last Redacted Information **Protected Information Type** Complete Information (See Rules 16.602 and 16.604) (See Rule 16.605) A. Social security number Last four digits only XXX-XX-XXXX B. Financial account numbers Full account number Partial account number only C. Date of birth mm/dd/yyyy Year only D. Individual taxpayer identification numbers XXX-XX-XXXX Last four digits only

Rule 17.200—Form 211: Protected Information Disclosure, continued

E.	Personal identification numbers	Full number	Partial only
F.	Other unique identifying numbers	Full number	Partial only
G.			
	Additional protected information	Full information	Partial information
H.			
	Additional protected information	Full information	Partial information
l.			
	Additional protected information	Full information	Partial information
J.			
	Additional protected information	Full information	Partial information

2. Respondent The spouse who did not file for divorce.

Provide the complete version of protected information and the redacted version included in documents you file. If Petitioner is filling out this form, provide as much information about Respondent as you can.

	First	Middle Las	t
Р	rotected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
Α.	Social security number	 XXX-XX-XXXX	Last four digits only
В.	Financial account numbers	Full account number	Partial account number only
C.	Date of birth	/ mm/dd/yyyy	Year only
D.	Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E.	Personal identification numbers	Full number	Partial only
F.	Other unique identifying numbers	Full number	Partial only
G			
	Additional protected information	Full information	Partial information
Н.			
	Additional protected information	Full information	Partial information
I.			
	Additional protected information	Full information	Partial information
J.			
	Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

Rule 17.200—Form 211: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information and the redacted version included in documents you file. Provide as much information about other parties as you can.

First	Middle Las.	t
Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E. Personal identification numbers	Full number	Partial only
F. Other unique identifying numbers	Full number	Partial only
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
l. Additional protected information	Full information	Partial information
J. Additional protected information	Full information	Partial information

4. Children

Provide the complete version of protected information and the redacted version included in documents you file.

A.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	mm/dd/vyvv	Year only	

Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.200—Form 211: Protected Information Disclosure, continued

B.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
(2) Social security number		 <i>XXX-XX-XXXX</i>	Last four digits only	
(3) Date of birth		/ mm/dd/yyyy	Year only	

C.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
(3) Date of birth		/ / mm/dd/yyyy	Year only	

D.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
	(2) Social security number	 XXX-XX-XXXX	Last four digits only	
	(3) Date of birth	/ / mm/dd/yyyy	Year only	

E.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)	
	(1) Child's full name	First, middle, last name	Child's initials	
(2) Social security number (3) Date of birth		 XXX-XX-XXXX	Last four digits only	
		/ mm/dd/yyyy	Year only	

Check this box if you are attaching a separate sheet listing additional children.

Continued on next page

 $Rule\ 17.200-Form\ 211: \textit{Protected Information Disclosure},\ continued$

5.	Inform	ation	provided	by:
----	--------	-------	----------	-----

	/s/
Handwritten signature of Petitioner or attorney if filing in paper	Electronic signature of Petitioner or attorney if filing electronically
Law firm, if applicable	
Mailing address Cit	ty State ZIP code
()Phone number	
Email address	Additional email address, if applicable
Month Day Year Day Year	

Rule 17.200-Form 212: Joint Statement on Legal Parent

- The parties use this form if a child is born or conceived during the marriage and both parties want the court to find that one of the parties is not a **legal parent** of the child. *Note:* For purposes of this form, **legal parent** is a person who is recognized by law as a parent to a child because of marriage.
- This form tells the court that both parties agree that one party is not a **biological parent** and should be *disestablished* as (should no longer be) a legal parent of the child.
- This form can only be used if the party being disestablished is a legal parent of the child because of the marriage of the
 parties and there is a pending dissolution of marriage action in Iowa. Do not use this form if the party being
 disestablished is a legal parent of the child because of an affidavit, court order, or action in another state.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District (County where your case is filed	County
Upon the Petition of		Equity case no	
Petitioner Full name: first, middle, la	st	Joint Statement on Parent	Legal
and concerning			
Respondent Full name: first, mide	ile, last		
Petitioner's or Respond	Check each that applies A. Petitioner's or Respondent's name Petitioner's or Respondent's unborn B. Petitioner's or Respondent's name following children born during the materials.		parent of ed due date parent of the
First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
(1)		(4)	
(2)		(5)	
(3)		(6)	
Check this box if you ha Respondent is not a bio	logical parent.	isting additional children for whom Pe	titioner or

Rule 17.200—Form 212: Joint Statement on Legal Parent, continued

2. Biological Parent

The biological parents, if known, of the children are as follows:

First, middle, & last initials of each child	Biological parent	First, middle, & last initials of each child	Biological parent
(1)		(4)	
(2)		(5)	
(3)		(6)	

	(2)			(5)		
	(3)			(6)		
3.	Best Interests of th					
	It is in the best interests of the children and the parties that Petitioner's or Respondent's name					
	is found not to be a le	gal parent of the child	or (2 0. 220 <i>p</i> 0.	
4.	Guardian Ad Litem					
		the court may appoir I that we may have to		•		• /
5.	Request					
	We ask the court to	find and conclude tha	at t	the legal parent,		
		rent of the child or child that the court disest		dren, including any u	nborn ch	
6.	Attorney Help					
	A. Petitioner Check of	one				
	(1) O An attorney	did not help me prepare	or f	fill in this paper.		
		helped me prepare or fill				
	If you check (2), you must fill in the follo	win	ng information:		
	Name of attorney	or organization, if any	_	$\overline{Attorney}$'s P.I.N. # $-Ask$	the attorne	Py
	Business address	of attorney or organization	_	City	State	ZIP code
	()	(,	, , , ,
	Attorney's phone	number Attorney's j	tax	number – optional Attor	ney's email	l address – optional

Continued on next page

Rule 17.200—Form 212: Joint Statement on Legal Parent, continued

	(1) An attorno	ey helped me	prepare or fill in	n this paper.		
				Attorney's P.I.N.	# – Ask the attorn	ney
	Business addre	ess of attorney	or organization	City	State	ZIP code
	()_	waa mumbar	()	x number – optional	Attornon's and	ril addrassti
_			Attorney s ja	x riumoer – opnonai	Allorney s emo	ui auaress – opnor
	aths and Signat					
Α.	Petitioner's Oath	า and Signat	ture			
	l, Print your name		, have read this	Joint Statement, and	d I certify under p	enalty of
				a that the information		
	7.6		, 20	Petitioner's signa		
	Month	Day	Year	Petitioner's signa	ture*	
	Mailing address			,	State	ZIP code
	()					
	Phone number		Email address	Ac	dditional email ac	ldress – if available
	* Whether filing elec electronically, scar			ndwrite your signature file electronically.	on this form. If you	ı are filing
_	Respondent's O	ath and Sig	nature			
ĸ	respondent 5 C	atir and Oig				
В.						
В.	l, Print your name			Joint Statement, and		
В.	•	nt to the laws o		s Joint Statement, and		
В.	perjury and pursuar	nt to the laws o				
В.	perjury and pursuar	nt to the laws o			I have provided i	
В.	perjury and pursuar Statement is true ar Month	nt to the laws o	f the State of low	a that the information	I have provided i	n this Joint
В.	perjury and pursuar Statement is true ar	nt to the laws o	f the State of low	a that the information Respondent's sign	I have provided i	
В.	perjury and pursuar Statement is true ar Month	nt to the laws o	f the State of low	Respondent's sign	I have provided i	n this Joint ZIP code

Rule 17.200—Form 213: Motion to Disestablish Legal Parent

- A party uses this form if a child is born or conceived during the marriage and one of the parties wants the court to find and conclude that one of the parties is not a biological parent of the child and should be *disestablished* as (should no longer be) a legal parent of the child.
- For purposes of this form, legal parent is a person who is recognized by law as a parent to the child because of marriage.
- This form can only be used if the party sought to be disestablished is a legal parent of the child because of the
 marriage of the parties and there is a pending dissolution of marriage action in Iowa. If the party sought to be
 disestablished is a legal parent of the child because of an affidavit, court order, or action in another state, do not use
 this form.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court t	County where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Motion to Disestablish Legal Parent
and concerning	
Respondent Full name: first, middle, last	
A. O Petitioner B. O Respondent Legal Parent Check each that apple A. Petitioner's or Respondent's nanof Petitioner's or Respondent's nanof the following children bo List children's initials and birth year	is a legal parent but may not be a biological part's unborn child expected to be born Expected due date is a legal parent but may not be a biological par
First, middle, & last initials of each child	First, middle, & last initials of each child Birth year
(1)	(4)
(2)	(5)
(3)	(6)

2. Genetic Tests

Rule 17.200—Form 213: Motion to Disestablish Legal Parent, continued

	$Ch\epsilon$	eck e	each that applies							
	A.] I agree to cooperate with getting any g	enetic test that the court orders.						
	B.] I understand that I may have to pay for	any genetic test that the court o	rders.					
	C.		Genetic tests* have been done and sh		is not the					
			biological parent.	Petitioner's or Respondent's name	!					
			*Note on genetic tests: Genetic testir with verified documentation of the chai evaluation report directly to the clerk of 600B.41A.	n of custody, and the laboratory	must send the					
3.	Re	equ	uest							
	l a	sk t	the court to:							
	A. Appoint a guardian ad litem (an attorney) for the child or children. I understand that I may have to pay the costs of the guardian ad litem.									
	B.		rder genetic tests if needed and order the ofor testing.	at Petitioner, Respondent, and ch	nildren					
	C.	Fir	ind that, if Petitioner's or Respondent's name	excluded by genetic testing, is n	ot a					
		bio ab	Petitioner's or Respondent's name ological parent of the child or children, in bove, and that the court disestablish tha hildren.	cluding any unborn child, listed in	n section 1					
4.	Ch	nild	Support Recovery Unit (CSRU)							
	Che	eck c	one							
	A.	0	CSRU is providing services. Note: You must give a copy of this Motion to C	SRU if it is providing services.						
	B.	0	CSRU is not providing services.							

Continued on next page

Rule 17.200—Form 213: Motion to Disestablish Legal Parent, continued

5.	Attorney Help Check one											
	A. An attorney did not help me prepare or fill in this paper.											
	=		helped me p									
		_	, you must fill ir	-								
		Name of attor	ney or organiza	tion, if any		ttorney 's P.1	.N. # – Asi	k the attori	пеу			
		Business addr	ess of attorney o	or organizati	ion C	<i>Lity</i>		State	ZIP code			
		()_		()							
		Attorney's pho	one number	Attorney	s fax nı	mber – option	al Attor	ney's ema	ril address – optional			
υ.	Section This do	6 to be complet cument, if filed	Service by Neted only if filing electronically, v	in paper or i vill automati	if the oth ically be	er party is ex served on re	gistered pa	rties.				
	I,	your name		,	certify t	hat on	a tla		, 20			
7.	Oath I,	your name	ure						ZIP code ursuant to the			
			2	ın								
	Signed	on: Month	Day , Z	Year	Your sig	nature*						
	Mailing	; address			City			State	ZIP code			
	(Phone i) 1umber	<i>Emai</i>	il address			Additional	email addi	ress – if available			
			ically or in paper ning it and then fil			our signature (on this form.	If you are	filing electronically,			
Mai	rch 2014			Rule 1	7.200—F	orm 213			Page 3 of 3			

[Court Order March 26, 2014]

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

- Read the <u>Guide to Representing Yourself in an Iowa Divorce Case with Children</u> on the Iowa Judicial Branch website before using this form.
- Use this Answer form 215 if you received Petition form 201, otherwise use form 216.
- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	where your spouse filed the Petition	County
Upon the Petition of	Equity case no	
Petitioner Your spouse's full name: first, middle, last and concerning	Answer to Petition for D of Marriage with Ch	
Respondent Your full name: first, middle, last		
Personal Information Fill in all information th A. Petitioner's information	at you know.	
Check one If paragraph 1A of the Petition (form 201) is not (1) Petitioner's (your spouse's) birth year (2) Petitioner's birth year and present resi The correct information is: Birth year	and present residence are correct in	the Petition.
Present street address	City State	ZIP code
B. Respondent's information Check one If paragraph 1B of the Petition (form 201) is not (1) Respondent's (your) birth year and present respondent to the correct information is:	esent residence are correct in the Pe	ss. etition.
Birth year		

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued Present street address City State ZIP code Email address C. Other person, if any, who has visitation or custody rights of the parties' children: Fill in as much information as you know. Check one If paragraph 1C of the Petition (form 201) is not correct, check (2) and fill in the blanks. The information for the other person who has visitation or custody rights of the children is correct in the Petition. The information for the other person who has visitation or custody rights of the children is not correct in the Petition. The correct information is: Full name: first, middle, last City ZIP code Present street address County Email address 2. General Information About the Marriage and the Parties A. Date and location of the marriage Check one If paragraph 2A of the Petition (form 201) is not correct, check (2) and fill in the blanks. The date and location of the marriage are correct in the Petition. The date and location of the marriage are not correct in the Petition. The correct information is: Month Day Year City State B. Children Check one If paragraph 2B of the Petition (201) is not correct, check (2) and all items that are true. The Petition provides the correct information about the children. The Petition does not provide the correct information about the children. The correct information is: ☐ There are children under age 18 who are children of both Petitioner and Respondent. ☐ There are children under age 18 who were adopted or born during this marriage. This includes any child born to a spouse during the marriage, but for whom the other spouse is not a parent. ☐ There are children 18 years or older who still need support. Petitioner or Respondent is pregnant.

Rule 17.200—Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

\sim	1-1-		c:	4:	- 5	-1-:	1_1	
U.	ıae	enu	пса	tion	OI	cni	ıa	ren

Check one

If paragraph 2C of the Petition (201) is not correct, check (2) and provide the correct information about the children's identification.

(1) The children are identified correctly in the Petition.

(2) The children are not correctly identified in the Petition. The correct information is:

First, middle, & last initials of each child	Birth year
a.	
b.	
c.	

First, middle, & last initials of each child	Birth year
d.	
e.	
f.	

☐ Check this box if you have attached a separate sheet listing additional children.

D. Children's living arrangements

Check one

If paragraph 2D of the Petition (201) is not correct, check b and provide the correct information about the children's residence.

i.	Children:	ormation is: I									_
		Initials	Initials	Initi	als		Initials		Initi	als	
	Lived with	1 Adult name		•		/	_/	_ to		/	_/
	Λ+	Aduii name			mm	dd	уууу		mm	dd	уууу
	At City			St	ate	_					
ii.	Children:										
		Initials	Initials	Initi	als		Initials		Initi	als	
	Lived with	າ		from		/	_/	_ to		/	_/
		Adult name			mm	dd	уууу		mm	dd	yyyy
	At										
	City			St	ate						
iii.	Children:		. <u></u>								
		Initials	Initials	Initi	als		Initials		Initi	als	
	Lived with	1		from		/	/	to		/	/
		Adult name		_	mm	dd	yyyy		mm	dd	yyyy
	At										
	City			St	ate						
iv.	City			St	ate						

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued Lived with Adult name City State Children: Initials Initials Initials **Initials** Initials Lived with mmState Check this box if you have attached a separate sheet listing additional children. If the children have been in Iowa for less than six months, the court may not be able to issue an order about custody or visitation. The rules are complicated, and you may need to talk to an attorney. E. Petitioner's residence (1) The **only** reason that Petitioner (your spouse) is living in lowa is just to get a divorce. True False If Petitioner does not live in Iowa, or if Petitioner lives in Iowa for reasons other than just to get a divorce, check "False." (2) If you disagree with paragraph 2E(2) of the Petition (201), fill in the blanks. Petitioner has lived in Iowa for the last _____ years and ____ months __ county. F. Parties' residence Check each that is true (1) Petitioner (your spouse) has lived in Iowa for more than one year. If you did not check (1) or (2), you should talk to an attorney. (2) Respondent (you are Respondent) is a resident of Iowa.

G. Condition of the marriage

Check all that are true

- (1) The marriage is broken and cannot be saved.
- (2) This is the only divorce case going on in involving this marriage. If you did not check (2), explain in 4. You should also talk to an attorney.
- (3) Petitioner did not file the Petition in good faith for the purpose of ending the marriage.
- (4)
 Counseling will not save the marriage. If counseling may save the marriage, do not check (4).

H. Respondent's status

Check each that is true

(1) Respondent (you are Respondent) is in the military service.

There are special rules that may prevent this dissolution from going forward if you are in the military. You should talk to an attorney.

Rul	e 17.2	00—Form	215: A	4nswe	er to Petition for I	Dissolution of M	Iarriage with Ch	ildren, continue	ed		
		(2)	Res	spor	ndent is in pr	ison or jail	at			in	
							Name of j	acility		State	
					re in prison or , appointed to				an ad litem," a p me cases.	person, usual	lly an
	I.	Protect Check of		or n	o contact o	rders					
		(1)			s neither a "p ier (your spou		der" nor a "no	contact ord	ler" between R	espondent:	(you) and
		(2)					no contact o	der" betwee	n Respondent	and Petitio	ner.
		` '			heck (2), fill i				'		
			a.	Col	unty and state	where the o	order came fro	om:			
								County		Si	tate
			b.	Col	urt case numb	oer:					
•	04	hor Ca			haut tha C	hildran					
3.		ner Ga eck A or		SAI	bout the C	miaren					
	A.				nformation in	n 3 in the P	etition abo	ut other cas	ses about the	children is	correct.
	В	_			-	armatian in	o 2 in the D	atitian aha	ut athar assa		
	B.	\sim			in of the info				ut other case	es about th	ie
					ill in the corre			ation is.			
		(1) Ju		-		J					
		Ch	eck a	or b).						
		a.	\bigcirc	The	ere is no juver	nile court cas	e.				
		b.	Ŏ	The	ere is a juveni	le court case	. The correct	information i	is:		
			If y	ou ci	heck b, fill in	the following	g information	;			
			i.	Col	unty and state	of the juven	ile court case	:			
								County			State
			ii.	Col	urt case numb	oer:					
				Che	eck one						
				(a)	☐ Concurr	ent jurisdiction	on has been	granted.			
				(b)	☐ Concurr	ent jurisdiction	on has not be	en granted.			
							given concurr u should talk t		n (permission), th	ien child custo	ody cannot
		(2) Cu	stod	ly or	der						
		Ch	eck a	or b).						
		a.	0	The	ere is no cus	stody order.					
		b.	Ō	The	ere is a custo	ody order.					
			If y	ou ci	heck b, fill in	the following	g information	:			
				i.	County and	state where t	the custody o	rder came fro			
									County		State
				ii.	Court case r	number:					

Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued (3) Child support order Check a or b. There is no child support order. There is a child support order. If you check b, fill in the following information: County and state where the child support order came from: County State Court case number: 4. Other Information Respondent denies anything in the Petition that Respondent has not agreed is correct. In addition, Respondent provides the following information: All of the basic information you need to tell the court is on this form. Provide other information only if you need to explain something. 5. Respondent's Request A. Respondent asks the court to: Check all that apply. The court will only consider items that are checked. If you do not know what you want, talk to an attorney. (1) End the marriage of Respondent (you) and Petitioner (your spouse). Decide custody and visitation. (3)
Order child support and medical support. (4) Order payment of school or college tuition. (5) Fairly divide the property and the debts of the parties. (6) Order that Petitioner pay the court fees. (7) Order that Petitioner pay for Respondent's attorney's fees before the divorce is final If you check (7), you must file form 222. (8) Order that Petitioner pay spousal support (alimony) to Respondent. If you check (8), you must file form 222. (9) Change Respondent's last name to: Name can only be changed to name on birth certificate or name used immediately prior to the marriage. Print your former or birth name (10) Order counseling to save the marriage. (11) Other request:

 $Rule~17.200\\ --Form~215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

6.	Attorney Help Check one
	A. An attorney did not help me prepare or fill in this paper.
	B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:
	Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney
	Business address of attorney or organization City State ZIP code
	(
7.	Service Instructions If Respondent is filing in paper Check one A. Respondent will accept service of documents at the attorney's address listed above; or B. Respondent will accept service of documents in this case at the mailing address below.
8.	Certification of Service by Mailing or Delivery Section 8 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties.
	I,, certify that on, 20
	I mailed or gave a copy of this Answer to the other party or the other party's attorney at this address:
	Name of person to whom I delivered or mailed it
	Party's or attorney's mailing address City State ZIP code

Continued on next page

 $Rule~17.200\\ --Form~215: \textit{Answer to Petition for Dissolution of Marriage with Children}, continued$

, have read this	is Answer, and I certify	under penalty		
the State of Iowa	that the information I	have provided		
Your signature	Your signature*			
City	State	ZIP code		
SS	Additional email add	ress – if available		
	Your signature City	City State		

Important Instructions for filing this form on next page.

Instructions for Rule 17.200-Form 215: Answer to Petition for Dissolution of Marriage with Children, continued

Do not file these instructions

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file. For help with registration, see the eFiler's User Guide How to Register Pro Se (Self Represented) for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer. The login page can be accessed from two different paths: you may directly log in to EDMS; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see How to eFile to an Existing Case.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see *How to Resubmit a Returned Filing*.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 201).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Petition if box 7A on the Petition is checked.

Do not file these instructions

December 2013 Instructions for Rule 17,200—Form 215

Page 1 of 1

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 201, use form 215 for your Answer.

Read the <u>Guide to Representing Yourself in an Iowa Divorce Case</u> on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211).
- If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for	County where Petition is filed
Upon the Petition of	Equity case no
Petitioner You spouse's full name: first, middle, last	General Answer to a Petition for Dissolution of Marriage
and concerning	with Children
Respondent Your full name: first, middle, last	

- 1. Respondent's Answer You are Respondent.
 - A. Respondent admits that the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you think are true. If you decide later that the paragraphs you list here are not true, it may be too late to change your answer.

- B. Respondent denies that the following paragraphs in the Petition are true:
- C. Respondent does not know whether the following paragraphs in the Petition are true:

List the numbers of the paragraphs in the Petition that you are not sure about. If you cannot say a paragraph or a part of a paragraph is true or not true, it may be because you do not know something, such as a date, place, or when something happened.

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parents:

(1)	Children:	Initials	Initials	*		itials	<u></u>	tials	
	Imitais	Immais	muus	,	1711	ituis	1711	uais	
	Lived with	pa o	from	1	_/	_/	_ to	_/	_/
	Aunthu	ne		rnm	ии	уууу	mm	ии	уууу
	At City		State						
(2)	Children:								
(-)	Initials	Initials	Initials	ř	In	itials	Ini	tials	
	Lived with		from	ı	_/	_/	to	_/	_/
	Adult na	me		mm	dd	yyyy	to	dd	yyyy
	At		State						
(3)	Children:								
(0)	Initials	Initials	Initials	ř	In	itials	Ini	tials	
	Lived with		from	1	/	/	to	/	/
	Adult na	те		mm	dd	yyyy	to 	dd	_ /
	At		State						
			siaie						
(4)	Children:	Initials	Initials	·		itials		tials	
			1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	Lived with	me	from)	-/	_/	_ to	-/ 	_/
				mm	аа	уууу	mm	ш	уууу
	At		State						
(5)	Children:								
(5)	Initials	Initials	Initials	7	_ In	itials	Ini	tials	
	Lived with		from	ı	_/	_/	to	_/	_/
	Adult na			mm	dd	уууу	mm	dd	уууу
	At		Charles						
				1:		1:2: 1 -1	1 . 1		
	Check this box if y		-		_				-1-44 1-
	If the children have able to get custody.	The rules are comp	or six months, yo plicated and you	ou may . may ne	ed to ta	io get a di ilk to an at	vorce, but torney.	you mış	gut not be

E. Protective or no contact orders

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

	Che	eck (one								
	(1)	С			s neither a "pro ner (your spous	tective order" n e).	nor a "no	contact c	rder" betwee	n Respondent	(you) and
	(2)	С			•	order" or "no co the following inf			een Respond	lent and Petitio	ner.
			a.	Co	unty and state v	where the order o	came from				
								County	,	S	tate
			b.	Co	urt case numbe	r:					
F.	Ot	her	cas	es a	about the chil	dren					
	Che	eck ((1) <i>oi</i>	(2)							
	(1)	C) Th	ere a	are no other ca	ases about the	childrer	n. If you ci	heck (1), skip to) G.	
	(2)	Č) Th	ere a	are other case	s about the chi	ildren.				
						tate about the ch					n order
				-		rules are compl		-	y need to talk	to an attorney.	
						licable informati	ion belov	ν.			
	a.		venil e <i>ck</i> i								
		i.	еск і			a court casa					
		i. ii.			ere is no juvenile ere is a juvenile						
		".	_		•	e following info	rmation:				
			(a)	Co	unty and state o	of the juvenile co	urt case:				
			. ,		•	•		County			State
			(b)	Juv	enile court case	number:				-	
				Ch	eck (i) or (ii)						
				(i)	☐ Concurre	nt jurisdiction ha	s been g	ranted.			
				(ii)	☐ Concurre	nt jurisdiction ha	s not bee	en granted			
						ourt has not given is case. You shou				,) then child cust	ody cannot
	b.	С	ıstod	y or	der						
				_	_	t custody in Iow	va if there	e is a custo	ody order ente	red in another s	state.
			eck i								
		i.		Th	ere is no custo	ody order.					
		ii.		Th	ere is a custoc	dy order.					
			If y	ou c	heck ii, fill in th	e following info	rmation:				
			(a)	Co	unty and state v	vhere the custod	ly order o	ame from	: County		State
			(I=)	C-					County		siate
			(b)	Col	uπ case numbe	r:			-		

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

C.		ild su e <i>ck</i> i	upport order or ii.		
	İ.		There is no child support order.		
	ii.		There is a child support order.		
	<i>If y</i>	ou cł	neck ii, fill in the following information:		
		(a)	County and state where the child support order came from:	County	State
		(b)	Court case number:	_	
G. Re	espo	nde	nt denies anything in the Petition that is not admi	tted in this Answer.	
H. Ot	her	infor	mation:		
D		1 4	Sa Daniel A. Sa da		

2. Respondent's Request If you do not know what you want, talk to an attorney.

Respondent asks the court to: Write here what you would like the court to do. For example, tell the court if you want a divorce. Be brief. Do not write long descriptions.

Continued on next page

3. Attorney Help

Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children, continued

	A. O	An attorney			:::			
	В. ()	An attorney h						
		Name of attorne	ey or organizat	ion, if any	Attorne	ey 's P.I.N. ‡	# – Ask the attorn	зеу
		Business addre	ss of attorney o	r organizatio	on City		State	ZIP code
		()_ Attorney's phor	ne number	_ (_) 's fax number	– optional	Attorney's ema	il address – optional
4.		ce Instructio						
	If Resp	oondent is filin	ıg in paper					
	_		will accept se	ervice of do	ocuments a	t the attor	ney's address	listed above; or
	в. О	-	-				at the mailing a	
5.		ication of S						
٠.	Section		d only if filing i	in paper or ij	f the other pa		ot from electronic red parties.	filing.
	l,			, c	ertify that o	on	Day	, 20
		-					-	
	addres		opy of this Ai	nswer to tr	ne other pa	rty or the	other party's a	ttorney at this
	Name o	f person to whon	ı I delivered or	mailed it				
		f person to whon or attorney's ma			City		State	ZIP code
6.	Party's		iiling address		City		State	ZIP code
6.	Party's Oath	or attorney's ma	uiling address		·	his Answ <i>e</i>		
6.	Party's Oath I, Print	or attorney's ma and Signatu your name	uiling address	, r	nave read t		er, and I certify	under penalty
6.	$\overline{Party's}$ Oath I, \underline{Print} of perj	or attorney's ma and Signatu your name ury and pursu	iiling address Ire ant to the lav	, h , bws of the S	nave read t			under penalty
6.	$\overline{Party's}$ Oath I, \underline{Print} of perj	or attorney's ma and Signatu your name	iiling address Ire ant to the lav	, h , bws of the S	nave read t		er, and I certify	under penalty
6.	$\overline{Party's}$ Oath I, \underline{Print} of perj	or attorney's ma and Signatu your name ury and pursu Answer is true	iiling address Ire ant to the lav	, h , bws of the S	nave read th		er, and I certify	under penalty
6.	Party's Oath I, Print of perj in this Signed	or attorney's ma and Signatu your name ury and pursu Answer is true	niling address Ire Pant to the lave and correct	, h ws of the S t. _, 20	state of low	a that the	er, and I certify	under penalty nave provided
6.	Party's Oath I, Print of perj in this Signed	or attorney's ma and Signatu your name ury and pursu Answer is true	ailing address Ire Tant to the law e and correct Day	, h ws of the S t. _, 20 Year	nave read th	a that the	er, and I certify information I h	under penalty nave provided ZIP code
6.	Party's Oath I, Print of perj in this Signed Mailing (Phone r	or attorney's ma and Signatu your name ury and pursu Answer is true on: Month address number	ant to the lave and correct Day	ws of the St, 20	read the state of low Your state	a that the	er, and I certify information I h State	under penalty nave provided ZIP code

Instructions for Rule 17.200—Form 216: General Answer to a Petition for Dissolution of Marriage with Children

Instructions for Filing an Answer to a Petition for Dissolution of Marriage with Children

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If your divorce case was filed in a county that uses electronic filing, you must register to electronically file.
 For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (SelfRepresented) for eFiling</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case.</u>
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the efiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your spouse is exempt from electronic filing requirements, in which case, you must
 mail or serve in paper a copy of the document on your spouse if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition (form 201).
- · The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- · Keep one of the copies for your records.
- Serve one of the copies of your Answer on your spouse (Petitioner).
- You can hand one of the copies of the Answer form to your spouse, or mail a copy to your spouse at the address shown on the Petition.
- If your spouse has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

December 2013

Instructions for Rule 17.200-Form 216

Page 1 of 1

[Court Order December 19, 2013]

Forms 217 to 220: Reserved

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation

Form 221 is for either party to tell the court about custody and visitation before the case is finished, or to have a witness tell the court about custody and visitation before the case is finished.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where the case is filed
Upon the Petition of	Equity case no.
Petitioner Full name as it appears on the Petition: first, middle, last	Affidavit for Temporary Custody and Visitation
and concerning	
Respondent Full name as it appears on the Petition: first, middle, last	
 1. Statement A. My name is Full name of witness: first, middle, is B. My relationship to First, middle, last name of points: 	arty; or initials of child (Do not use child's full name.)
	this Affidavit to determine temporary custody and were present in court, I would testify as follows:
☐ Check here if there are additional pages atto	ached. ned on next page

Rule 17.200—Form 221: Affidavit for Temporary Custody and Visitation, continued

Atto Chec	orney Help k one								
	A. An attorney did not help me prepare or fill in this paper.								
в. (An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:								
	Name of atto	mey or organ	nization, if any	v Attorne	ey 's P.I.N. #	– Ask the attorn	ney		
	Business add	ress of attorn	ey or organiz	ation City		State	ZIP code		
	()		()					
	Attorney's ph	one number	Attorn	ey's fax number	– optional	Attorney's ema	nil address – option		
l,	h and Signa								
I, laws		lowa that I ue and corre	have read t						
I, laws in thi	of the State of is Affidavit is tr	lowa that I ue and corre	have read t	this Affidavit aı	nd that the i				
I, laws in thi	of the State of	lowa that I ue and corre	have read t		nd that the i				
I, laws in thi	of the State of is Affidavit is tr	lowa that I ue and corre	have read t	this Affidavit aı	nd that the i				
I, laws in thi	of the State of is Affidavit is trued on: Month	lowa that I ue and corre	have read t	this Affidavit an	nd that the i	nformation I l	have provided		
I, laws in thi	of the State of is Affidavit is trued on: Month	lowa that I ue and corre	have read t	this Affidavit an	nd that the i	nformation	have provided		
I,	of the State of is Affidavit is true of the State of is Affidavit is true of the state of the st	Flowa that I ue and correct Day	have read to ect. , 20 Year mail address	this Affidavit and Your signature. City City	re*	nformation State	have provided		

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for	ounty where your case is filed			
Upon the Petition of	Equity case no			
Petitioner Full name: first, middle, last	Motion in a Dissolution of Marriage with Children			
and concerning				
Respondent Full name: first, middle, last				
A. Petitioner B. Respondent 1. Request A. I ask the court to Check all that apply. If you check any box in A, you (1) Change the hearing date that has be (2) Award me temporary financial support (3) Order temporary custody and visitate (4) Order temporary child support and re (5) Order counseling (conciliation). (6) Set a hearing date for a divorce Decentify (7) Shorten the 90-day waiting period for (8) Award me attorney's fees before the concept of the con	een set for Month ort. cion. medical support. cree by default. or getting a divorce Decree divorce is final. me before the divorce is sernity and require that Person	Day, 20 Teee. s final. stitioner, Respondent, and child		
Continued	on next page			

Rule 17.	200—Forn	n 222: Motion in a l	Dissolution of Marriage with Children, continued
	(12)	Other request	Explain
B.	I am m	aking the requ	est(s) in this Motion because:

Continued on next page

Rule 17.200—Form 222: Motion in a Dissolution of Marriage with Children, continued

В. С	A. An attorney did not help me prepare or fill in this paper.B. An attorney helped me prepare or fill in this paper.							
	If you check B	s, you must fill i	in the following ir	formation:				
	Name of attorn	ney or organiza	ution, if any	Attorney's P.I.N.	# - Ask the attorn	пеу		
	Business addr	ess of attorney	or organization	City	State	ZIP code		
	() Attorney's pho	one number	() Attorney's fa	x number – optional	Attorney's ema	il address – opt		
Sectio		ted only if filing	in paper or if the	elivery other party is exen be served on regis.		filing.		
			ceri	ify that on		20		
1			, 0011	tilat on		,		
l mai addre	ess: of person to who	copy of this N	Motion to the o	ther party or the	other party's at	torney at thi		
l mai addre	led or gave a dess:	copy of this N	Motion to the o	ther party or the				
I mai addre	led or gave a dess: of person to who	copy of this Norm I delivered o	Motion to the o	ther party or the	other party's at	torney at this		
Name Party Oath	led or gave a dess: of person to who 's or attorney's mand Signat	copy of this Norm I delivered o	Motion to the o	ther party or the	other party's at	torney at this		
I mai address address \overline{Name} \overline{Party} Oath I, \overline{Prir} laws	led or gave a dess: of person to who 's or attorney's mand Signat nt your name of the State of	m I delivered on ailing address ure	Transiled it City , certaive read this M	ther party or the	other party's at State of perjury and perion information is hearth.	torney at this ZIP code		
Name Party Oath I, Prin laws this M	led or gave a dess: of person to who 's or attorney's mand Signat nt your name of the State of Motion is true and	m I delivered on ailing address ure lowa that I hand correct. I	r mailed it City , cert ave read this M ask the court to	ify under penalty otion and that the	other party's at State of perjury and perion information is heart.	torney at this ZIP code		
Name Party Oath I, Prin laws this M	led or gave a dess: of person to who 's or attorney's mand Signat nt your name of the State of	m I delivered on ailing address ure	r mailed it City , cert ave read this M ask the court to	ther party or the	other party's at State of perjury and perion information is heart.	torney at this ZIP code		
Name Party Oath I, Prin laws this M	led or gave a dess: of person to who 's or attorney's mand Signat nt your name of the State of Motion is true and	m I delivered on ailing address ure lowa that I hand correct. I	r mailed it City , cert ave read this M ask the court to	ify under penalty otion and that the grant this Motion r signature*	other party's at State of perjury and perion information is heart.	torney at this ZIP code		
I mai addre	led or gave a dess: of person to who 's or attorney's mand Signat nt your name of the State of Motion is true and d on: Month	m I delivered on a ling address ure lowa that I hand correct. I Day	Transiled it City , cert ave read this Mask the court to Year You	ify under penalty otion and that the grant this Motion	other party's at State of perjury and perinformation I has n.	torney at this ZIP code ursuant to the ave provided		

December 2013

Rule 17.200—Form 223: Response to a Motion

Use this form if your spouse has filed a Motion (most likely form 222) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	county where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last	Response to a Motion
and concerning	
Respondent Full name: first, middle, last	
why you disagree with the request in C. (1) Change the hearing date that ha (2) Order temporary financial supports (3) Order temporary custody and vis (4) Order temporary child support a	at apply. If you check any box in B, you must tell the court as been set for $\underline{\hspace{1cm}}$, 20 $\underline{\hspace{1cm}}$. Year ort.
(5) Order counseling (conciliation).(6) Set a hearing date for a divorce	Decree by default.
(7) Shorten the 90-day waiting period	
(8) Award attorney's fees before the(9) Award spousal support (alimony	

Rule 17.200—Form 223: Response to a Motion, continued
(10) Order genetic testing to decide paternity and require that Petitioner, Respondent, and child appear for testing.
(11) Appoint an attorney to represent the child (required when asking to disestablish paternity).
(12) Other request Explain
C. I disagree with the Motion because:

Continued on next page

Rule 17.200—Form 223: Response to a Motion, continued

3.	Attorney Help									
	Check one									
	A. An attorney did not help me prepare or fill in this paper.									
	B. An attorney helped									
	If you check B, you mu	st fill in the follow	ving information:							
	77		4	7.7 (1 4 1 4						
	Name of attorney or or	дапіzапоп, іј апу	Апогпеу s P.1	.N. # – ASK the	апогпеу					
	Business address of att	orney or organiza	ation City		State	ZIP code				
	()_ Attorney's phone numb	()							
	Attorney's phone numb	er Attorne	ey's fax number – opti	onal Attorne	y's email	address – optiona				
4.	Certification of Service	by Mailing o	or Delivery							
	Section 4 to be completed only i					ling.				
	This document, if filed electroni	-	-	-						
	I,		, certify that on _	d overtle	_ <u></u>	, 20				
	,				•					
	I mailed or gave a copy of	tnis Kesponse	to the other party	y or the other	party s	attorney at				
	this address:									
	Name of person to whom I deliv	ered or mailed it								
	Party's or attorney's mailing ac	ldress	City		State	ZIP code				
5.	Oath and Signature									
٠.	_		acutify , , malay may	altar at mania		aut ta tha				
	I,	at I have road th	, certilly under per his Pospopso and	that the infor	/ and pur mation L	suant to the				
	laws of the State of Iowa that I have read this Response and that the information I have provide in this Response is true and correct.									
	in the responds to the are									
	Signed on: Month Day	, 20	Your signature*							
	Signed on: Month Day	Year	Your signature*							
					~					
	Mailing address		City		State	ZIP code				
	()									
	Phone number	Email address		Additional en	ıail addres	S – if available				
	* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically,									
	scan the form after signing it and			,		,				
Dec	cember 2013	Rule	17.200—Form 223			Page 3 of 3				

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children

Each party must complete one of these forms. Provide as much information as you can.

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211), if you have not already done so.
- ffiling in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for	County
	County where your case is filed
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Financial Affidavit for a Dissolution of Marriage with Children
and concerning	
Respondent Full name: first, middle, last	
l am	
Check one	
A. Petitioner	
B. Respondent	
l <u>,</u> Print your name	, state that this is a true and complete statement
of my assets, debts, and present in	come as of the $\underline{\underline{Day}}$ day of $\underline{\underline{Month}}$, 20 $\underline{\underline{Year}}$.
1. Assets Things you and your spouse own.	•
A. Real estate Attach additional sheets if necessary.	
*Owner (Whose name is on the deed?): $P = P$	etitioner $R = Respondent \ J = Joint (Both)$

Type of real estate	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Homestead Address of the home you own & where you usually live		\$	\$ to:	\$
(2) Other real estate Address of other houses, apartments, or land that you own.		\$	\$ to:	\$

[☐] Check this box if you have attached a sheet with additional information on real estate.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

*Owner (Whose name is on the car or vehicle title?): P = Petitioner R = Respondent J = Joint (Both)

Vehicles Make (e.g. Ford) Year	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net Value Market value minus debt owed	
(1)		\$	\$	\$	
		•	to:	Φ	
(2)		¢	\$	\$	\$
		3	to:	Ψ	
(3)		\$	\$	\$	
		Ψ	to:	Ψ	

[☐] Check this box if you have attached a sheet with additional information on vehicles.

C. Securities, stocks, & bonds

*Owner (Whose name is on the securities, stocks, or bonds?): P = Petitioner R = Respondent J = Joint (Both)

Securities, stocks, & bonds Company name	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed	
(1)		\$	\$	\$	
		•	to:	Ψ	
(2)		\$	\$	\$	
(2)		Φ	to:	Э	
(3)				\$	¢
(3)		\$	to:	\$	

[☐] Check this box if you have attached a sheet with additional information on securities, stocks, and bonds.

D. Life insurance

*Owner (Whose name is on the policy?): P = Petitioner R = Respondent J = Joint (Both)

Life insurance Company name	Owner* P,R,J	Cash value Not death benefit	Loan from cash value Total amount still owed on loan	Net value Cash value minus loan owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

[☐] Check this box if you have attached a sheet with additional information on life insurance.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

E. Bank accounts

*Owner (Whose name is on the checking or savings account?): P = Petitioner R = Respondent J = Joint (Both)

Checking & savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash"	Owner*	Cash value	Personal loans or overdraft accounts Total amount you still owe on it	Net value Cash value minus loan / overdraft owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

☐ Check this box if you have attached a sheet with additional information on checking and savings accounts.

F. Household contents

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Household contents Describe	Owner*	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1) Furniture			\$	Φ.
a.		\$	to:	\$
b.		\$	\$	\$
D.	Φ	Ψ	to:	Ψ
C.		\$	\$	\$
O.		9	to:	Φ
d.		\$	\$	\$
G.			to:	
(2) Appliances / Electronics		\$	\$	\$
a.			to:	
b.		\$	\$	\$
D.		Φ	to:	Ψ
C.		\$	\$	\$
0.		Ψ	to:	Ψ
d.		\$	\$	\$
u.		Ψ	to:	Ψ
(3) Other contents		· ·	\$	\$
a.		\$	to:	Ψ

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

b.	\$	\$ to:	\$
C.	\$	\$ to:	\$

☐ Check this box if you have attached a sheet with additional information on household assets.

G. Retirement assets

*Owner (Whose name is on the retirement account?): P = Petitioner R = Respondent J = Joint (Both)

Retirement assets Examples: Pensions, IRAs, 401(k)s, annuities, etc.	Owner*	Market value What it would sell for	Loan from retirement account Total amount you still owe on it and to whom owed	Net value Market value minus loan owed
(1)		\$	\$ to:	\$
(2)		\$	\$ to:	\$
(3)		\$	\$ to:	\$

☐ Check this box if you have attached a sheet with additional information on retirement assets.

H. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets Describe	Owner* P,R,J	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
			to:	
(2)		\$	\$	\$
(2)		Ψ	to:	•
(3)		\$	\$	\$
(3)		Φ	to:	Ψ

☐ Check this box if you have attached a sheet with additional information on other assets.

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Totals

(1) Total from attached sheets	Listed in 1A-H.	\$
(2) Total net value of assets	Listed in 1A-H.	\$ 0.00

2. Other Debts

Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

Include as "Other Debts" money you or your spouse owe that you did not include in the "Debt" or "Loan" columns in 1A-H.

*Whose debt is it? P = Petitioner R = Respondent J = Joint (Both)

Other debts List only those not included as "debt" or "loans" under "Assets" in part 1.	Whose debt?* P,R,J	Amount owed
A.		\$
В.		\$
C.		\$
D.		\$
E.		\$
F.		\$
G.		\$
H.		\$
L		\$
J.		\$
К.		\$
L.		\$
M.		\$
N.		\$
O. Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on other debts and enter the total.		\$
Total other debts Including amounts shown on attached sheets, if any.	•	\$

Continued on next page

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

3. Income and Deductions

The deductions listed in section 3 are the deductions allowed by the Iowa Child Support Guidelines and are subtracted when determining net income.

A. Petitioner

(1) Income and Deductions If you are Respondent, give your best estimate for each amount. *How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

Current income and deductions	Ir	ncome	Dec	luctions
for Petitioner Sources of income and deductions, not including Social Security benefits	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
a. Wages from employer Employer name:		\$		\$
Job title: b. Wages from employer				
Employer name: Job title:		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other <i>Identify:</i>		\$		\$
h. Other <i>Identify</i> :		\$		\$
i. Other Identify:		\$		\$
j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.				\$
k. Union Dues				\$
**I. Prior court-ordered child support Paid to:				\$
**m Prior court-ordered medical support Paid to:				\$
**n. Prior court-ordered spousal support (alimony) Paid to:				\$
Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on Petitioner's income and deductions.		\$		\$
Totals Current income and deductions for Petitioner		\$ 0.00 Income total		\$ 0.00 Deductions total

^{**}Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order (an order filed before this action). If child support payments were not made through the Child Support Recovery Unit, attach proof of payments for the past 12 months.

(2) Petitioner's other children with no court-orderd support, if any: If you are Respondent,

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

		middle, & last s of each child	Birth ye	ear		ldle, & last Feach child	Birth yea	r
i.					iv.			
ii.	i.				V.			
iii	i.				vi.			
		eck this box if you itioner is the legal		hed a sheet	listing add	ditional childre	en for whom	
) Pe	etitio	ner's actual chi	ild care e	xpenses o	due to er	mployment, i	if any:	
Fo	or cus	todial parent only	. If you are	e not the cus	stodial pai	rent, skip to (4)).	
\$		per	Frequenc					
	Am	ount	Frequenc	y				
) Pe	etitio	ner's income fr	om Socia	al Security	benefits	s, if any:		
a.	Su	pplemental Se	curity Inc	ome (SSI)	, if any:			
a.		pplemental Sed Supplemental Sed	-		-	ner for disabilit	ty: \$	per mo
a.	i.	Supplemental Sec	curity Incom	ne (SSI) paid	d to Petitio			
a.	i. ii.	Supplemental Sec	curity Incon	ne (SSI) paid	d to Petitio	en for their disa	bility: \$	per mo
a.	i. ii.	Supplemental Sec Supplemental Sec List the children	curity Incom curity Incom in Petition	ne (SSI) paid	d to Petitio	en for their disa eive SSI bene	ibility: \$	per mo
a.	i. ii.	Supplemental Sec	curity Income curity Income in Petition	ne (SSI) paid	d to Petition d to childre who rece	en for their disa	shility: \$efits Use initi	per mo
a.	i. ii.	Supplemental Sec Supplemental Sec List the children First, middle, &	curity Income curity Income in Petition	ne (SSI) paid ne (SSI) paid ner's home	d to Petition d to childre who rece	en for their disa	shility: \$efits Use initi	per mo
a.	i. ii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each	curity Income curity Income in Petition	ne (SSI) paid ne (SSI) paid ner's home	d to Petition d to childre who rece	en for their disa	shility: \$efits Use initi	per mo
a.	i. ii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each	curity Income curity Income in Petition	ne (SSI) paid ne (SSI) paid ner's home	d to Petition d to childre who rece	en for their disa	shility: \$efits Use initi	per mo
a.	i. ii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b)	curity Income urity Income in Petition last child	ne (SSI) paid ne (SSI) paid ner's home Birth year	d to Petition d to childre who rece	en for their disa eive SSI bene First, middle initials of ea (d) (e)	fits <i>Use initi</i> s, & last ch child	per mo
a. b.	i. ii. iii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b) (c) Check this b	in Petition last child	ne (SSI) paid ne (SSI) paid ner's home Birth year	d to Petition d to childre who rece	en for their disa	fits Use inities, & last child	per mo
	i. ii. iii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b) (c) Check this b Supplemental	in Petition last child	ne (SSI) paid ne (SSI) paid ner's home Birth year	d to Petition d to childre who rece	en for their disa	fits Use inities, & last child	per mo
	i. ii. iii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b) (c) Check this b Supplemental Cial Security Di	in Petition ox if you had Security (Security (Sec	ne (SSI) paid ne (SSI) paid ner's home Birth year ave attachee Income (SSI	d to Petition d to childre who recently dansheet l	en for their disa	fits Use inities, & last child	per mo
	i. ii. iii. So	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b) (c) Check this b Supplementa cial Security Di Benefit paid for F	curity Income curity Income in Petition last child ox if you had Security isability (Security cache)	ne (SSI) paid ne (SSI) paid ne (SSI) paid ner's home Birth year ave attached Income (SSI) SSD) or S	d to Petition d to childre who recently dansheet l	en for their disa	fits Use inities, & last child	per monals only: Birth year ho receive), if any: per monals
	i. ii. iii. So i. ii. iii.	Supplemental Sec Supplemental Sec List the children First, middle, & initials of each (a) (b) (c) Check this b Supplementa cial Security Di Benefit paid for F Benefit paid for e	curity Income curity Income in Petition Iast child Income in Iast Child Income in Iast Child Income Iast Child Income in Iast Chi	ne (SSI) paid ne (SSI) paid ne (SSI) paid ner's home Birth year ave attached Income (SSI) SSD) or S n Petitioner's	d to Petition d to childre who recently a sheet l. d. d. Social Se	en for their disa	fits Use inities, & last child	per monals only: Birth year ho receive), if any: per monals

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

First, middle, & last initials of each child	Birth year	Fii ini
(a)		(d)
(b)		(e)
(c)		(f)

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

[☐] Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSD).

B. Respondent

(1) Income and Deductions If you are Petitioner, give your best estimate for each amount.

*How often is income paid or deduction taken?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

Current income and deductions	ıl	ncome	Dec	ductions
for Respondent Sources of income and deductions, not including Social Security benefits	How often paid?* W,B,M,T	Gross amount Before deductions	How often taken?* W,B,M,T	Amount of deduction
a. Wages from employer Employer name: Job title:		\$		\$
b. Wages from employer Employer name: Job title:		\$		\$
c. Unemployment assistance		\$		\$
d. Workers' compensation		\$		\$
e. Pension / Retirement		\$		\$
f. Veteran's benefits		\$		\$
g. Other Identify:		\$		\$
h. Other Identify:		\$		\$
i. Other Identify:		\$		\$
j. Mandatory pension contribution List required contribution only (e.g. IPERS, TIAA/CREF). Contributions above the required amount are optional and not allowed as a deduction.				\$
k. Union Dues				\$
**I. Prior court-ordered child support Paid to:				\$
**m.Prior court-ordered medical support Paid to:				\$
**n. Prior court-ordered spousal support (alimony) Paid to:				\$

Rule 17.200-Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Ο.	Totals from attached sheets, if any						
	Check this box if you have attached a sheet with additional information on Respondent's income and deductions.		\$		\$		
Totals Current income and deductions for Respondent			\$ 0.00		\$ 0.00		
			Income total		Deductions total		
**Un	**Under "Amount of deduction," list the amount of child support or spousal support actually paid under a prior court order						
	n order filed before this action). If child support payment pof of payments for the past 12 months.	ts were not mad	le through the Child	Support Reco	very Unit, attach		

(2) Respondent's other children with no court-orderd support, if any: If you are Petitioner, provide as much information as you can.

List the initials and birth year of each child for whom Respondent is the legal parent. Do not include any children involved in this case.

First, middle, & last initials of each child	Birth year
i.	
ii.	
iii.	

First, middle, & last initials of each child	Birth year
iv.	
V.	
vi.	

☐ Check this box if you have attached a sheet listing additional children for whom Respondent is the legal parent.

(3) Respondent's actual child care expenses due to employment, if any:

For custodial parent only. If you are not the custodial parent, skip to (4).

\$ 	per	
Amount		Frequency

- (4) Respondent's income from Social Security benefits, if any:
 - a. Supplemental Security Income (SSI), if any:

i	Supplemental	Security	Income i	(SSI)	paid to	Respondent for	r disability:	\$	per month
	Jupplemental	OCCUITE	IIICOIIIC I		Daid to	Trespondent ic	ı uısabılıtı.	v	DEI IIIOIILII

ii. Supplemental Security Income (SSI) paid to children for their disability: \$_____per month

iii. List the children in Respondent's home who receive SSI benefits Use initials only:

First, middle, & last initials of each child	Birth year
(a)	
(b)	
(c)	

First, middle, & last initials of each child	Birth year
(d)	
(e)	
(f)	

Check this box if you have attached a sheet listing additional children who receive Supplemental Security Income (SSI).

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

b.	Social Security Disability (SSD)	or Social Security Retir	ement (SSR), if any:
	i. Benefit paid for Respondent	\$	per month
	ii. Benefit paid for each child in Resp	ondent's home \$	per month
	iii. Number of children receiving bene	efitsc	hildren
C.	Social Security Disability (SSD)	, if any:	
	i. Paid to children for their disability:	\$	per month
	ii. List the children in Respondent's	nome who receive SSD bene	fits Use initials only:
	First, middle, & last initials of each child Birth y	First, midd initials of e	
	(a)	(d)	
	(b)	(e)	
	(c)	(f)	
	Check this box if you have attache Supplemental Security Disability		hildren who receive
A. Costs	THealth Insurance, Medical for Petitioner If you are Respondent, titioner has health insurance as True False If you check a, list the frequency and of If you check b, continue to (2). *How often paid? W = Weekly B = T = Two times a month	give your best estimate for each callable through employer ost of health insurance paid. Bi-weekly (every other week	h amount. er.
	Type of employer health insurance	How often paid?* W,B,M,T	Cost
	Single health insurance		\$
	Family health insurance		\$
(2) Pe a. b.	titioner has health insurance the True False If you check a, list the frequency and of the second	ost of health insurance paid.	

Rule 17.200-Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

If you check a, list the frequency and cost of medical support paid.

True False

If you check b, continue to (4).

Type of other health insurance	How often paid?* W,B,M,T	Cost
Single health insurance		\$
Family health insurance		\$

(3) Petitioner pays medical support for the child or children as required by court order.

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly

	T = Two times a month			
	Medical support paid to	How often paid?* W,B,M,T	Cost	
			\$	
			\$	
			\$	
(4) Pet a. (b. (titioner has dental insurance availab True False	ole through employe	r.	
~. ,	If you check a, list the frequency and cost of If you check b, continue to (5).	dental insurance paid.		
	*How often paid? $W = Weekly$ $B = Bi-M$ $T = Two \ times \ a \ month$	eekly (every other week)	M = Monthly	
	Type of employer dental insurance	How often paid?* W,B,M,T	Cost	\neg
	Single dental insurance		\$	
	Family dental insurance		\$	
(5) Pet	titioner has dental insurance throug	h a source other tha	n employer.	_
a. b.	True False			
D .	If you check a, list the frequency of other de If you check b, continue to (6).	ntal insurance paid.		
	*How often paid? $W = Weekly$ $B = Bi-w$ $T = Two \ times \ a \ month$	eekly (every other week,	M = Monthly	
2013	Rule 17.200-	-Form 224		Page 11 c

Rule 17.200-Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Type of other dental insurance	How often paid?* W,B,M,T	Cost
Single dental insurance		\$
Family dental insurance		\$

(6)	Petitioner	pays	other	medical	expenses	not	covered	by	insurance.

a.	\bigcirc	True
b.	\bigcirc	False

If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.

If you check (6)b, continue to 4B, Costs for Respondent.

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

How often paid?* W,B,M,T	Cost
	\$
	\$

B. Costs for Respondent If you are Petitioner, give your best estimate for each amount.

	<u> </u>	
a.	True)
h	Fals	6

If you check a, list the frequency and cost of health insurance paid. If you check b, continue to (2).

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Type of employer health insurance	How often paid?* W,B,M,T	Cost
Single health insurance		\$
Family health insurance		\$

(2) F	Respondent has he	ealth insurance thro	ough a source	other tha	n emplover.
(-)					

If you check a, list the frequency and cost of health insurance paid. If you check b, continue to (3).

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

order.

True

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Type of other health insurance	<u> </u>	en paid?* Cost
Single health insurance		\$
Family health insurance		\$

(3) Respondent pays medical support for the child or children as required by court

			\$
			\$
			\$
T = Two times a month	í		
Type of employer den	tal insurance	How often paid?* W,B,M,T	Cost
Type of employer den			Cost \$

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

Type of other dental insurance	How often paid?* W,B,M,T	Cost
Single dental insurance		\$
Family dental insurance		\$

(6)	Respondent pays other medical expenses not covered by insurance.
	a. True
	b. False
	If you check a, list the cost and frequency of other medical expenses paid that are not covered by insurance. Include all medical, dental, vision, etc. expenses as one lump sum.
	If you check (6)b, continue to 5, Expenses.
	*How often paid? $W = Weekly$ $B = Bi$ -weekly (every other week) $M = M$ onthly $T = T$ wo times a month

How often paid?* W,B,M,T	Cost
	\$
	\$

5. Expenses

A. Living arrangements

Check one

- (1) My spouse and I live in the same home.(2) My spouse and I do not live in the same home.
- B. My expenses

Note: You must complete this section if you or your spouse want spousal support (alimony).

*How often paid?: $W = Weekly \ B = Bi$ -weekly (every other week) M = Monthly T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$
(5) Medical, dental Not health insurance payments – see (10).			\$

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

(6) Utilities (gas, electric)		\$
(7) Phone		\$
(8) Cable / satellite television / internet		\$
(9) Car insurance payment		\$
(10) Health insurance payment		\$
(11) Credit card payments		\$
(12) Car loan payments		\$
(13) Other loan payments		\$
(14) Other expense Identify:		\$
(15) Other expense Identify:		\$
(16) Other expense Identify:		\$
(17) Totals from attached sheets, if any Check this box if you have attached a sheet with additional information on your expenses.		\$
Total expenses		\$ 0.00

Continued on next page

Rule 17.200—Form 224: Financial Affidavit for a Dissolution of Marriage with Children, continued

6.	Attori Check of	ney Help							
	A. 🗆	An attorney	did not he	lp me prepa	are or	fill in this pape	er.		
	B. □	An attorney If you check I	-						
		Name of attor	ney or organ	ization, if any	'	Attorney's P.I.	N. # – Ask	k the attorn	аеу
		Business addr	ess of attorne	ey or organiza	ation	City		State	ZIP code
				()_				til address – optional
7.	Section This do	cument, if filed	ted only if fili electronically	ng in paper or v, will automa	r if the d tically i	other party is exe be served on regi.	stered par	ties.	_
	l,				, certif	y that on			, 20
	Print	your name				Mon	th	Day	Year
8.		or attorney's n	_	SS	City			State	ZIP code
	l,	your name			, certif	y under penalt	y of perju	ıry and p	ursuant to the
		f the State of ed in this Fina	ncial Affida	vit is true ar	nd corr		and that	the infor	mation I have
	Sioned	on: Month	$-\frac{Day}{Day}$, 20 <u> </u>	Your	sionature*			
	218/100		24)	1007	1000	ang. ration c			
	Mailing	address			City			State	ZIP code
	(Phone r	umber		nail address		\overline{A}	dditional	email addi	ress – if available
	* Wheth	er filing electron	ically or in pa	per, vou must h	andwrit				filing electronically,
		he form after sig				,	,	y y	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Dec	ember 20	13		Rule	17.200-	-Form 224			Page 16 of 16

Rule 17.200—Form 225: Affidavit of Mailing Notice

Petitioner: You **must** file this Affidavit if you served Notice by Publication in a newspaper and you ask the court for a divorce Decree by default. Petitioner **must** also complete the oath and signature section on the next page.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your case is filed	County
Upon the Petition of	Equity case no	ailing Notice
Petitioner Full name: first, middle, last	Allidavit of W	alling Notice
and concerning		
Respondent Full name: first, middle, last	-	
 Attorney Help Check one A. An attorney did not help me prepar B. An attorney helped me prepare or f 		
If you check B, you must fill in the following		
Name of attorney or organization, if any	Attorney's P.I.N. # – Ask t	he attorney
Business address of attorney or organizati	ion City	State ZIP code
() ('s fax number - optional Attorn	ey's email address – op

Petitioner's Oath and Signature on next page

Rule 17.200—Form 225: Affidavit of Mailing Notice, continued

l,	,	certify under pena	lty of perju	ıry and p	oursuant to th
Print your name					
laws of the State of Iowa					nt by ordinar
mail with proper postage	Day the following pa		Ye	ar	
Check one	, the following pa	aper or papers.			
_	5 5				
Original Notice and	Petition for Dissoli	ution of Marriage, or	•		
Notice of Intent to F	ile a Written Applic	cation for Default De	ecree		
\smile					
to Bosnondont's last kno	wen addrage as f	allowe:			
to Respondent's last-kno	own address as f	ollows:			
	own address as f			State	7ID as de
to Respondent's last-kno	own address as f	ollows:		State	ZIP code
	own address as f			State	ZIP code
	own address as f			State	ZIP code
Respondent's street address	, 20	City		State	ZIP code
	, 20		re*	State	ZIP code
Respondent's street address	, 20	City	re*	State	ZIP code
Respondent's street address Signed on: Month Da	, 20	City Petitioner's signatu	re*		ZIP code
Respondent's street address	, 20	City	re*	State State	
Respondent's street address Signed on: Month Da	, 20	City Petitioner's signatu	re*		

whether fung electronically or in paper, you must nandwrite your signature on inis form. If you are fung electronically, scan the form after signing it and then file electronically.

Rule 17.200—Form 226: Notice of Intent to File Written Application for Default Decree

Petitioner: If Respondent has not filed an Answer or Motion within 20 days from the date of Service of the Original Notice or date of the Acceptance of Service, you may seek a Default Decree.

Before Petitioner asks the court for a Default Decree of Dissolution of Marriage, Petitioner must file this form (226).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District C	ourt for	unty where your c		Coi	unty
	Con	unty where your c	ase is filed		
Upon the Petition of		Equity case n	o		
Petitioner Full name: first, middle, last	(of Intent to tion for De		
and concerning					
Respondent Full name: first, middle	e, last				
To: Respondent's first name	26.14				
Respondent's first name	Middle name	Last na	me		
Date of Notice:	, 2	0			
	Day nportant Notice				
Handwritten signature of Petitioner or	ou should seek leg	/s/		ioner or	Attorney
if filing in paper		if filing electi	ronically		
The person who provided the signa	ture above must fil	l in the informati	on below.		
Present street address (If attorney,	, firm address)	City		State	ZIP code
()	Email addre				
	Email addre	P.S.S			
Instructions for Petitioner					
Filing your Notice electron	•				
EDMS will automatically serve Re		,	·	·	
Filing your Notice in pape	•	-	om the court to	file in pa	per)
 Deliver a copy of this form to F Complete form 225 and file the File the original of this form (2) Keep a copy for your records. 	e original at the clerk of 26) at the clerk of court	court's office.			
December 2013	Rule 17.20	00—Form 226			Page 1 of 1

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children

Use this form only if you have filed a Petition for Dissolution of Marriage (201) and:

- · Your spouse (Respondent) did not file an Answer, or
- Your spouse will not work with you to prepare a Settlement Agreement (228).

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- If filing in paper, you may use form 211 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County where your cas	e is filed	County
Upon the Petition of	Equity case no		
Petitioner Full name: first, middle, last		Relief in a	Dissolution Children
and concerning			
Respondent Full name: first, middle, last			
 Personal Information Fill in all informat and you fear for your safety, you may leave your a I am Check A or B and fill in C and D. 			ulted by your spou
 A. Petitioner B. Respondent C. Petitioner's birth year and present res 	idence: Birth year		
 A. Petitioner B. Respondent C. Petitioner's birth year and present res Petitioner's present street address	Birth year	State	- ZIP code
 A. O Petitioner B. O Respondent C. Petitioner's birth year and present res 	City () Phone number	Email ad	
 A. O Petitioner B. O Respondent C. Petitioner's birth year and present res Petitioner's present street address County	Birth year City Phone number residence:	Email ad	

2. Request for Relief

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

A.	Childre	en Check all that are true			
	(1)	Petitioner and Respondent agree to the Plan (229). A parenting plan must be pr			
	(2)	Petitioner and Respondent do not a lifeld a Proposed Parenting Plan (2 Request for Relief.	agree about custody and vi 230). <i>A parenting plan must b</i>	sitation. e provided t	o the court with the
	(3)	Petitioner has taken the children in	the middle course. Attach	certificate	
	(4)	Respondent has taken the children	in the middle course. Atta	ch certifica	ıte
В.		down of marriage arriage is broken down and cannot b	e saved.		
C.	Couns	selina			
		eling will not save the marriage.			
D.	Waitin	g period before decree Check one			
	(1)	More than 90 days have passed sir an Original Notice.	nce Respondent accepted	service or	was served with
	(2)	Fewer than 90 days have passed s an Original Notice, but I want the co hearing because:			
E.	Financ	This paper explains how I would like	e to settle all issues in my	divorce.	
	(1)	I filed a Financial Affidavit (224). I didentity and value of all assets and		losed all ir	ncome and the
	(2) 🔘	I am asking that the court not require	re me to file a Financial Aff	fidavit beca	ause:
F.	Child s	support Check all that are true			
		ount of child support is determined using an Services provides a child support esti			
	(1)	Petitioner shall pay child support to R	Respondent in the amount of	f \$	per month.
	(2)	Petitioner shall pay child support to a	third party in the amount of	·\$	per month.
		Third party's full name: first, middle, las	t		
		Present street address	City	State	ZIP code
		County			

Rule 17.200—	Form 227: Request for F	Relief in a Dissolu	tion of Marriage	with Children, continued	l		
(3)	☐ Respondent sha	all pay child sup	port to Petition	er in the amount of \$		pe	r month.
(4)	☐ Respondent sha	all pay child sup	port to a third p	party in the amount of	F\$	pe	r month.
	Third party's full	name: first, mida	lle, last				
	Present street ad	ldress	City	S	State	ZIP code	
	County						
(5)	Child support paym	ents shall begi	n on the	day of <i>Month</i>		, 2	20 <u> </u>
	for the following chi	ldren:		Monin			1ear
	First, middle, 8 initials of each		Birth year	First, middle, & initials of each		Birtl	h year
	a.			d.			
	b.			e.			
	c.			f.			
	☐ Check this b	ox if you are att	aching a separa	ate sheet listing addition	nal childr	en.	
(6)	Guidelines amo	ount. <i>If you che</i> quested:\$	ck (6), write the	nigher or lower than to amount you want and onth ne Guidelines amour	ł explain v	why in b.	
	exemption I ask the court to se	et the tax deduc	ction as follow	s.	Check or	ne for eac	h child
()	First, middle, & last initials of each child	Birth year	1	should now claim	Every Year	Even Years	Odd Years
	a.				0	0	\overline{O}
	b.				0	Ō	Ō
	c.				0	0	\overline{O}
	d.				0	0	$\overline{\bigcirc}$
	е.				0	0	\overline{O}
	f.				0	0	0
	☐ Check this box if	you are attachii	ng a separate sh	heet listing additional	children.		

Rule 17.	200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued								
	(2) The deduction will start in tax year ${Year}$.								
	Note: The parent with custody must sign IRS Form 8332 before the non-custodial parent can take the deduction. Tax forms are available from the IRS website: http://www.irs.gov . The earned income tax credit is not the same as the tax exemption.								
H.	Health care expenses I ask the court to set the health care expenses as follows: Check all that apply Petitioner Respondent (1) will provide medical support (health insurance). (2) will pay the first \$ of uncovered medical expenses for the children. After that amount is spent, then uncovered								
	medical expenses shall be paid								
	% by Petitioner and% by Respondent. (3) Shall pay cash medical support in the amount of \$ per month.								
I.	Division of Personal Property Check one								
	(1) All of the personal property obtained during the marriage has been divided. I ask that Petitioner will keep the personal property in Petitioner's possession, and Respondent will keep the personal property in Respondent's possession. If you check (1), skip to J.								
	(2) Our personal property has not been divided. I ask that our personal property be divided as follows:								
	a. Petitioner will get the following as Petitioner's separate personal property:								
	b. Deapandant will get the following as Deapandant's congrete personal property:								
	b. Respondent will get the following as Respondent's separate personal property:								
	\square Check this box if you attached a separate sheet listing additional information about personal property.								
	Note on retirement accounts and pensions: If the divorce Decree gives you or your spouse part of the other person's retirement account or pension, a separate order called a Qualified Domestic Relations Order (QDRO) must be entered. QDROs are complicated; you should ask an attorney for help with a QDRO.								
J.	Division of real estate								
	For each parcel of real estate you own, provide the following information. Attach a separate sheet for each additional parcel.								
	(1) Ownership of real estate Check one								
	a. We do not own any real estate. <i>If you check</i> a, <i>skip to</i> K.								

Rule 17.200—Form	m 227: Request for Relief in a Dissolution of	Marriage with Children, continued					
b.	We own real estate located at:		,				
		Street address					
	in the City of	, County of	, and				
	State of	This land is described in the deed or o	contract as follows:				
(2) Th	e real estate shall be:						
` '	eck one						
a.		led% to Petitioner and _	%				
b.	to Respondent. Awarded to Petitioner, subject	to all liens and mortgages					
C.	Awarded to Respondent, subje						
d.	× ' '						
(3) Ad	ditional real estate						
	Check this box if you are attaching sep		eal estate.				
	anging title to real estate is a complicated and ou will be changing title to real estate, you sho						
K. Divisio	n of debts						
Check o	ne						
(1) 🔘	There are no debts.						
(2)	I have listed all the debts I know ab Attach additional sheets if necessary.	out and ask that they be divided as	follows:				
a. Petitioner will pay the following debts:							
	Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed				
	(a)		\$				
	(b)		\$				
	(c)		\$				
	(d)		\$				

☐ Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

		(0)		- 1			*
		Check this Respondent	box if you are attaching a t's debts.	separa	te sheet listing	z additional inform	ation about
	C.	For any debt w	ve do not know about, t	he spo	use who ma	de the debt will p	ay that debt.
			close any credit cards and jo s a former spouse has acce				
L.	Cash	payment					
	l ask tl						
	Check o	ne					
	(1)	Neither Petition	ner nor Respondent p	oay any	money to t	he other.	
	(2)		Respondent \$		t	to equalize the d	ivision of property
	_	and debts by			20		
			Month	Day	, 20_ <u></u>	ur .	
	(3)	Respondent p	ay Petitioner \$		t	to equalize the d	ivision of property
		•			, 20_ <u></u>		
			Month	Day	Yea	ir	
M.		al support (ali	mony)				
	Check o						
	l ask tl						
	(1) \bigcirc		ner nor Respondent p				
	$(2) \bigcirc$	Spousal supp	ort (alimony) be paid a	as follo	ws:		
N.		change					
	Check o						
	\sim	nat my last na					
	(1)	Not be change					
	$(2) \bigcirc$	Be changed to	Print your former or	1. : . 41		Name can only be	
			rını your Jormer or	oirin na	ıme	name on birth cer used immediately	rtificate or name prior to the marriage.

3.

Rule 17.200—Form 227: Request for Relief in a Dissolution of Marriage with Children, continued

Ο.	Court fees								
	Check one								
	l ask that								
	(1) Petitioner will pay all court fees.								
	(2) Respondent will pay all court fees.								
	(3) Petitioner and Respondent shall each pay one-half of the remaining court fees.								
	(4) Petitioner and Respondent shall each pay one-half of the total court fees.								
P.	Attorney's fees								
	Check one								
	(1) I have no attorney's fees.								
	(2) I will pay my own attorney's fees.								
	(3) Task that my spouse pay me \$ for attorney's fees.								
Q.	Necessary documents								
	I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Decree.								
R.	Other request for relief								
	☐ Check this box if you have attached a separate sheet listing additional requests for relief.								
Sta	atements of Understanding and Fact								
Che	ck all that apply								
A.	☐ I have made a full disclosure of my property and debts to the court.								
B.	☐ This request for relief addresses all issues in my divorce.								
C.	☐ I want the court to approve this request for relief and make it part of the final Decree.								

Continued on next page

 $Rule\ 17.200-Form\ 227: \textit{Request for Relief in a Dissolution of Marriage with Children}, continued$

4.	Attorney Help
	Check one
	A. An attorney did not help me prepare or fill in this paper.
	B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:
	Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney
	Business address of attorney or organization City State ZIP code
	(
٠.	Certification of Service by Mailing or Delivery Section 5 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically will automatically be served on registered parties. 1,
	Print your name Month Day Year
	Name of person to whom I delivered or mailed it
	Party's or attorney's mailing address City State ZIP code
6.	Oath and Signature
	I,, have read this Request, and I certify under penalt
	Print your name of perjury and pursuant to the laws of the State of lowa that the information I have provided
	in this Request is true and correct.
	, 20
	Signed on: Month Day Year Your signature*
	Mailing address City State ZIP code
	()
	Phone number Email address Additional email address, if applicable
	* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically scan the form after signing it and then file electronically.
Dec	cember 2013 Rule 17.200—Form 227 Page 8 of

Rule 17.200—Form 228 Settlement Agreement for a Dissolution of Marriage with Children

Use this form only if you and your spouse both agree to the terms of a Settlement Agreement.

Do not use this form if:

- You and your spouse have no children under the age of 18.
- You and your spouse have no children 18 years of age or older who still need support.
- There are no children under age 18 who were adopted or born during this marriage.

Caution: This form may require you to provide protected or sensitive information.

- ☐ If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (211) if you have not already done so.
- [a] If filing in paper, you may use form 211 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court fo	County where your	case is filed	County
Jpoi	n the Petition of	Equity case	no	
Petit	ioner Full name: first, middle, last		ement Agreen on of Marriage	
nd c	concerning			
₹esp	pondent Full name: first, middle, last			
anc	ersonal Information Fill in all in I you fear for your safety, you may leave Petitioner's birth year and prese	your address, phone numbe nt residence:		ulted by your spoi
anc	l you fear for your safety, you may leave	your address, phone numbe		ulted by your spou
anc	l you fear for your safety, you may leave Petitioner's birth year and prese	your address, phone numbe nt residence: Birth year	r, and email blank.	ZIP code
A.	A you fear for your safety, you may leave Petitioner's birth year and prese Petitioner's present street address	your address, phone numbe nt residence: Birth year City Phone number	r, and email blank. State Email a	ZIP code
A.	Petitioner's birth year and prese Petitioner's present street address County	your address, phone numbe nt residence: Birth year City Phone number sent residence:	r, and email blank. State Email a	ZIP code

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

2.	Agreements											
	We	We agree to the following:										
	A.	Children Check all that are true										
		(1) We agree to the custody and visitation set out in the Agreed Parenting Plan (229).										
		(2) We do not agree about custody and visitation. We each filed a Proposed Parenting Plan (230). A parenting plan, either form 229 or form 230, must be provided to the court with the Settlement Agreement.										
		(3) Detitioner has taken the children in the middle course. Attach certificate.										
		(4) Respondent has taken the children in the middle course. Attach certificate.										
	B.	Breakdown of marriage The marriage is broken down and cannot be saved.										
	C.	Counseling										
		Counseling will not save the marriage.										
	D.	Waiting period before decree Check all that apply										
		(1) More than 90 days have passed since Respondent accepted service or was served with an Original Notice.										
		(2) Fewer than 90 days have passed since Respondent accepted service or was served with an Original Notice, but we want the court to take action right away without a separate hearing because:										
		This paper explains how we would like to settle all issues in our divorce.										
	E.	Financial affidavits Check one										
		(1) Petitioner or Respondent has filed a Financial Affidavit (224). If you check (1), check each that is applicable.										
		 a.										
		 D. Respondent has filed a Financial Affidavit. Respondent certifies that Respondent has fully disclosed all income and the identity and value of all assets and debts. 										
		(2) We are asking that the court not require us to file Financial Affidavits because:										
	F.	Child Support Check all that are true Note: The amount of child support is determined using the lowa Child Support Guidelines. The lowa Department of Human Service provides a child support estimator on its website. Go to: https://childsupport.ia.gov/ .										
		(1) Petitioner shall pay child support to Respondent in the amount of \$ per month.										
		(2) Petitioner shall pay child support to a third party in the amount of \$ per month.										

 $\textbf{Rule 17.200} \\ \textbf{—Form 228: } \textit{Settlement Agreement for a Dissolution of Marriage with Children}, \textbf{continued}$

		Third party's full nam	ne: first, middle,	, last				
		Present street addre	SS		,	State	ZIP code	
		County		_				
	(3)	•	oav child suppo	ort to Petition	er in the amount of	\$	pe	r month.
	(4)	☐ Respondent shall p	•					
		Third party's full nan	ne: first, middle,	, last				
		Present street addre	ess	City	,	State	ZIP code	'
		County		_				
	(5)	Child support payment	ts shall begin	on the	day of		, 2	20
	` '	for the following childre			Month			Year
			J		First middle 8	loot	T	
		First, middle, & last initials of each child	Birth	year	First, middle, 8 initials of each	child	Birt	h year
		a.			d.			
		b.			e.			
		c.			f.			
		Check this box if you	u are attachino	a senarate sh	Ladditiona	l children		
				-	_			
	(6)	 Check here if you Guidelines amoun 		•	-			
		a. Amount reque	• •	` .	•	•	,	
		b. Child support	should be diffe	erent from th	e Guidelines amoi	unt becaus	se:	
G.	Tax	exemption						
	(1)	I ask the court to set the	ne tax deducti	on as:		Check o	ne for eac	h child
		First, middle, & last initials of each child	Birth year	Parent who child for tax	should now claim deduction	Every Year	Even Years	Odd Years
		a.				0	O	0
		b.				Ô	Ô	Ô
		c.				ĬŎ	Ŏ	Ŏ
		L						

 $Rule\ 17.200 — Form\ 228:\ \textit{Settlement Agreement for a Dissolution of Marriage with Children}, continued$

		d.									0	0	0
		e.									0	0	0
		f.									0	O	O
	'		Check this b	ox if you	u are attaching	g a se	parate s	heet listi	ing additio	nal c	hildren.		
					ody must sign IR n the IRS website				non-custod	ial pa	rent can ta	ke the ded	uction.
					dit is not the sam								
	(2)	The	e deduction	will star	rt in tax year _	Year		_·					
Н.	Hea	alth	care expe	nses									
					health care	exp	enses	as follo	ows: Che	eck a	ll that ap	ply	
		tion	er Respond						,				
	(1) (\preceq	\sim		ovide medica						!!:-		
	(2) (J	O	the ch	ay the first \$_ nildren. After be paid								
			_		% by F	etitic	ner and	d	% l	by R	esponde	nt.	
	(3)	\bigcirc	\circ	shall p	oay cash med	dicals	support	in the a	amount of	\$		per	month.
I.			n of persor	nal pro	perty								
	(1) (We have d	posse:	our personal p ssion. Respo								
	(2) (\bigcirc			erty has not b	peen	divided	. but we	e agree it	will	be divide	d as follo	ows:
	\-/ \				neets if necessa			,					
		a.	Petitioner v	vill get t	the following	as Pe	etitioner	's sepa	rate perso	onal	property	:	
		b.	Responder	nt will g	et the followin	ng as	Respo	ndent's	separate	pers	sonal pro	perty:	
			Note on retin	ement ac	ccounts and per	nsion	s: If the o	divorce De	ecree aives	VOU (or vour sdo	use part of	the other
			person's retire	ement ac	count or pension	, a se	parate or	der called	l a Qualified	Dom	estic Relat	ions Order	

J. Division of real estate

 $\textbf{Rule 17.200} \\ \textbf{—Form 228: } \textit{Settlement Agreement for a Dissolution of Marriage with Children}, \textbf{continued}$

		_	ircel of real estate you own, provide the f parate sheet for each additional parcel.	following information.			
		Owner Theck	ship of real estate one				
	а	C	We do not own any real estate. If y	ou check a, skip to K.			
	b	C	We own real estate located at:	et address			
			in the City of				
			State of This follows:	s land is described in the dee	d or contract as		
	` '	he re	al estate shall be:				
	а		Sold and the profit or debt divided _ to Respondent.	% to Petitioner and	%		
	b		Awarded to Petitioner, subject to all	liens and mortgages.			
	С	C	Awarded to Respondent, subject to	all liens and mortgages.			
	d	. (Other Explain				
	(3) A	Additio	nal real estate				
] Ch	eck this box if you are attaching separate	sheets for additional parcels of	real estate.		
			changing title to real estate is a complicated an Il be changing title to real estate, you should ta		SS.		
K.	Divis	ion o	f debts				
	Check	k all th	at apply				
	(1)	igc) Th	ere are no debts.				
	(2) We have listed all the debts that we know about and ask that they be divided as follows: Attach additional sheets if necessary.						
	а	. Pe	titioner will pay the following debts:				
		i.	Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed		
		(a	a)		\$		
		(k))		\$		

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

(c)	\$
(d)	\$
(e)	\$

- ☐ Check this box if you are attaching a separate sheet listing additional information about Petitioner's debts.
- b. Respondent will pay the following debts:

i. Business or person to whom a debt is owed	ii. Account number, if any Last 4 numbers only	iii. Total amount still owed
(a)		\$
(b)		\$
(c)		\$
(d)		\$
(e)		\$

- ☐ Check this box if you are attaching a separate sheet listing additional information about Respondent's debts.
- c. For any debt we do not know about, the spouse who made the debt will pay that debt.

Note: You may want to close any credit cards and joint bank accounts in the names of both spouses. Closing accounts may limit the funds a former spouse has access to and may limit your liability for your former spouse's debts.

L. Cash payment

We ask that

Check one

((1)	\cap	Neither Petitioner	nor Respondent r	oav anv mone	to the other.

(2) Petitioner pay Respondent \$ _ and debts by		to equalize the division of property
Month	Dav	, 20
(3) Respondent pay Petitioner \$ _ and debts by		to equalize the division of property
Month		, 20

Continued on next page

Rule 17.200 - Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

Μ.	Spousal support (alimony) Check one								
	We ask that:								
	(1) Neither Petitioner nor Respondent pay spo	usal support (alimony) to the other.							
	(2) Petitioner pay spousal support (alimony) to	Respondent as follows:							
	(3) Respondent pay spousal support (alimony)	to Petitioner as follows:							
NI	Name change								
IN.	Name change Check one								
	We ask that								
	(1) Petitioner's name								
	×	None and the demands							
	b. O Be changed to:	Name can only be changed to name on birth certificate or name used immediately prior to the marriage.							
	Print Petitioner's former or birth name	immediately prior to the marriage.							
	(2) Respondent's name								
	a. Not be changed.								
	b. O Be changed to:	Name can only be changed to name on birth certificate or name used							
		immediately prior to the marriage.							
	Print Respondent's former or birth name								
Ο.	Court fees								
	Check one								
	We ask that								
	(1) O Petitioner will pay all court fees.								
	(2) Respondent will pay all court fees.								
	(3) Petitioner and Respondent shall each pay	one-half of the remaining court fees.							
	(4) Petitioner and Respondent shall each pay	one-half of the total court fees.							
P.	Attorney's fees								
	(1) Petitioner's attorney's fees								
	Check one								
	 a. Petitioner has no attorney's fees. 								
	b. Petitioner will pay Petitioner's attorney	s fees.							
	c. Respondent will pay \$	for Petitioner's attorney's fees.							

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

Attach additional sheets if necessary.

	Check of a. O b. O	dent's attorney's fees ne Respondent has no attorney's fees. Respondent will pay Respondent's a Petitioner will pay \$	-
Q.	-		any papers that may be needed to carry out this
R.	Other agr	eements	

Continued on next page

4.

Rule 17.200—Form 228: Settlement Agreement for a Dissolution of Marriage with Children, continued

3.		torney H	elp							
		Petitione	r							
		(1) A	n attorney	did not help	me prepare	or fill i	n this paper.			
		\sim			prepare or fil					
		U If	you check	(2), you must	fill in the follo	owing i	nformation:			
		Name	of attorney	or organizat	ion, if any	\overline{Ai}	torney's P.I.N.	# - Ask	the attori	пеу
		Busine	ess address	of attorney o	r organizatior	\overline{C}	ty		State	ZIP code
		()		_ ()				
	Ь		ey's phone	number	Attorney's	fax nui	nber – optional	Attor	ney's ema	il address – optional
	Б.	Respond				£:II :	41-:			
		\sim			me prepare					
					prepare or fil fill in the follo					
		Name	of attorney	or organizat	ion, if any	A	torney's P.I.N.	# - Ask	the attorn	пеу
		Busine	ess address	of attorney o	r organizatior	\overline{C}	ty		State	ZIP code
		()		_ ()				
		Attorn	ey's phone	number	Attorney's	fax nui	nber – optional	Attor	ney 's ema	il address – optional
4	Oá	aths and	Signatu	res						
	Th ou	is Settleme	nt Agreem and debts t	ent address						l disclosure of and make it a
	А.			d Signature						
		I,			, ce	rtify und	ler penalty of p	erjury an	ıd pursuar	nt to the
		Print you								
		like the cou Agreement	urt to addre t. I am volu	ss the issues ntarily signinง	in my divorce. g this Agreeme nd filing with th	Iknov ent. Ia	v I have the rigl m asking that t	ht to talk	to an atto	es how I would rney about this eement be
		Month		Day	_, 20 <u></u>	\overline{P}	etitioner's sign	ature*		
				>						
		Mailing ad	ldress		\overline{C}	ity			State	ZIP code
		,				,				
		Phone nun) iber		mail address			1dditiona	ıl email ad	ddress – if available
			_	nically or in pe			te your signature			
		елеси они	лину, всин н	ie jorm ajter st			next page			

 ${\it Rule~17.200--Form~228:~Settlement~Agreement~for~a~Dissolution~of~Marriage~with~Children,} continued$

B.	Respondent's Oath	and Sign	ature					
	I,, certify under penalty of perjury and pursuant to the <i>Print your name</i>							
	laws of the State of Iowa that I have read this slike the court to address the issues in my divor Agreement. I am voluntarily signing this Agree presented to a judge for approval and filing with				know I have the I am asking tha	right to talk	to an atto	rney about this
	7.6		, 20	_	-			
	Month	Day	rear		Respondent's	signature *		
	Mailing address			City			State	ZIP code
	()							
	Phone number		Email addre	SSS.		Additiona	al email ac	ddress – if available
	* Whether filing electronelectronically, scan th					ture on this j	form. If you	u are filing

Rule 17.200—Form 229: Agreed Parenting Plan

 $Use \ this \ form \ if \ both \ spouses \ agree \ to \ everything \ in \ the \ plan \ regarding \ child \ custody \ and \ visitation.$

Do not use this form if you and your spouse **do not** agree to all child custody and visitation arrangements. Instead, use form 230 to present a Proposed Parenting Plan to the court for the child custody and visitation arrangements you want.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for County who			County where yo	here you are filing this Parenting Plan			
Upo	n the Petition of		Eq	uity case no.	_		
Peti	tioner Full name: first, middle,	last		Agreed Parenting) Plan		
and	concerning						
Res	pondent Full name: first, m	iddle, last					
	nformation for the Co						
B. Children List all children born to or adopted by Petiitoner and Respondent.							
	First, middle, & last initials of each child	Present age	Gender M F	School	Grade		
	(1)		00				
	(2)		00				
	(3)		0				
	(4)		00				
	(5)		00				
	(6)		00				
	☐ Check this box if you	are attaching	a sheet listing a	ndditional children.	•		
C	Check all that are true	children					
	(1) The children list	ed in B are t	he only childre	en born to or adopted by thes	e parents.		
	(2) One or more of	the children	is in a juvenile	court case. If you check (2), a			

Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

- (3) There are children of Petitioner or Respondent not listed in B. Explain
 - If there are children born before the marriage, who are not the children of Petitioner or of Respondent, check (3) and explain.
 - If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child.

		These include making decisions about medical care, education, extracurricular activities, and religious instruction.
		Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
	(3)	Physical care means providing the main home for the child and taking care of the child.
		Joint physical care means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.
B.	Leg	gal custody should be
	Che	ck one
	(1)	O Joint legal custody to both parents
	(2)	O To Petitioner
	(3)	To Respondent
	(4)	O To other person
		Full name of other person: first, middle, last
C.	•	sical care should be
	Che	ck one
	(1)	To Petitioner If you check (1), use D for Respondent's visitation.
	(2)	To Respondent If you check (2), use D for Petitioner's visitation.
	(3)	Joint physical care to both parents If you check (3), use $D(12)$ to explain the joint physical care schedule.
	(4)	O To other person
		Full name of other person: first, middle, last
D.		itation
	Use	D only if one parent will have physical care. This is the schedule for the other parent to see the children.
	(1)	Visitation for
		Check one
		a. Petitioner
		b. Respondent

Rule 17.200-Form 229: Agreed Parenting Plan, continued

(2)			on permission b, <i>or</i> c.					
	a.	0	Visitation should not be	e allowed becau	ise:			
	b.	0	Visitation should be su	pervised becau	se:			
	C.	O Che	The supervisor for visit Regular unsupervise ck all that apply		Supervisor's		rst, middle, last igree:	
		i. ii.	Reasonable visita Mid-week visitatio M Tu W			a.m. t	≻ ≺	a.m. o.m.
		iii.	Every weekend From Day of week	at	Ŏ	a.m. p.m. to	at of week	jime Oa.m.
		iv. v.	Every other weeks From Day of weeks	end at		a.m. p.m. to	at	a.m. □ p.m. ime
		•	_ Guerrae					
		vi.	Visitation will start on Λ	1onth		Day	, 20 <u>Year</u>	
(3)			d holiday schedule					
	Not	e: Yo	dule tells on which holiday ou do not have to fill in eve no already has the childrer	rything. Any day t			ildren will spend t	hat day with the
	Н	olida	у	Tim	e	Every year P R	Even years P R	Odd years P R
	N	ew Ye	ear's Eve	:	O a.m. O p.m.	00	00	00
	N	ew Ye	ear's Day	:	O a.m. O p.m.	00	00	00
	М	artin	Luther King, Jr. Day	:	a.m. p.m.	00	00	00

Rule 17.200—Form 229: Agreed Parenting Plan, continued

President's Day	:	O a.m. p.m.	00	0	00
Memorial Day	:	a.m. p.m.	00	0	0
Independence Day July 4th	:	a.m. p.m.	00	0	0
Labor Day	:	O a.m. p.m.	0	0	0
Veterans' Day November 11th	:	O a.m. p.m.	0	0	0
Thanksgiving Day	:	O a.m. O p.m.	00	0	0
Christmas Eve	:	O a.m. O p.m.	0	0	0
Christmas Day	:	Q a.m. p.m.	0	0	0
Mother's Day	:	O a.m. p.m.	0	0	0
Father's Day	:	a.m. p.m.	0	0	0
Petitioner's Birthday	:	O a.m. p.m.	0	0	0
Respondent's Birthday	:	O a.m. p.m.	0	0	0
Halloween October 31st	:	a.m. p.m.	00	0	00
Other: Describe	:	O a.m. p.m.	00	00	00
Other: Describe	:	a.m. p.m.	00	0	00

(4) Special rules for holidays

Spe	Cla	Trules for floridays
Chec	k o	ne
a. (\supset	If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.
b. (C	If a holiday falls on a Monday or a Friday, the alternating weekend schedule in D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row.
c. (C	The parents will cooperate and rearrange the alternate weekend schedule so that neither parent will have the children more weekends in a row without contact with the other parent.
d. (\bigcup	

Continued on next page

Rule 17.200—Form 229: Agreed Parenting Plan, continued

(5) Summer

	Check one
	a. O Summer school vacation will be divided as Petitioner and Respondent agree.
	b. Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.
	c. The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.
	d. Other Explain
(6)	Winter school holiday
	Check one
	a. Winter school holidays will be divided as Petitioner and Respondent agree.
	b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
	c. Other Explain
	J. O Suits. 24p. 14.17
(7)	Spring school break
	Check one
	a. Spring school break will be divided as Petitioner and Respondent agree.
	b. Ospring school break will be alternated every other year between Petitioner and Respondent.
	c. Petitioner and Respondent will each have one-half of each spring school break.
	d. Other Explain
	The children's birthdays
	Check one
	a. O Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
	b. A child's birthday will be spent with the parent who has the child on that day.
	c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
	d. O Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
	e. Other Explain
	-

Rule 17.200—Form 229: Agreed Parenting Plan, continued

(9) Pick up and drop off
Check all that apply
a. O The parents will agree about pick up and drop off for each visit.
b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following persons are permitted to help:
d. Other arrangements for visitation For example, Petitioner and Respondent will meet
at a location between their residences. Explain
(10) The parent without the children may contact the children by Check all that apply a. Calling the children Check one i. At reasonable hours ii. Any day from Phone number Phone number where children can be contacted b. Emailing the children at this address:
Email where children can be contacted
 (11) Changes to the schedule Check all that apply a. The parties may agree to additional visitation or changes to the schedule. b. If one parent fails to arrive at the appointed time, then the other parent will wait for at least minutes before cancelling the visit.
c. No changes allowed except by a court order.
d. Other Explain
Continued on next page

Rule 17.200-Form 229: Agreed Parenting Plan, continued

(12) Joint physical care plan

Use only if both Petitioner and Respondent are given joint physical care.

a. How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children. b. How the children's time will be divided between Petitioner and Respondent: You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays. c. How the children's expenses will be paid: For example, expenses such as clothes, activities, and school fees. ___ d. How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development): e. Other issues: (13) Resolving disagreements Check one Before going to court to resolve disagreements, Petitioner and Respondent will Ask the following person to help them resolve disagreements: Relationship to parties Phone number Name ZIP code Present street address City State Go to mediation. Do not check if mediation will not work because of domestic violence or an injunction. Continued on next page

3.

4.

Rule 17.200—Form 229: Agreed Parenting Plan, continued

	torney Help eck one									
	Petitioner									
	(1) An attorney did not help me prepare or fill in this paper.									
	(2) An attorney helped me prepare or fill in this paper.									
	If you check (2), you must fill in the following information:									
	Name of attor	rney or organiza	tion, if any	Attorney's P.I.N. # – Ask the attorney						
	Business add	ress of attorney o	or organization	- City	State	ZIP code				
	()			•						
	Attorney's ph	one number	Attorney's fo	x number – optional	Attorney's ema	il address – optional				
В.	Respondent									
	(1) An attorney did not help me prepare or fill in this paper.									
	(2) An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information:									
	Name of attor	rney or organiza	tion, if any	Attorney's P.I.N.	Attorney's P.I.N. $\#$ – Ask the attorney					
	Business add	ress of attorney o	or organization	- City	State	ZIP code				
	()		()							
	Attorney's ph	one number	Attorney's fo	x number – optional	Attorney's ema	il address – optional				
Thi col	-	ng Plan addres Agreed Paren	ting Plan and n	and visitation issue		. We want the				
	l,		, certi	fy under penalty of pe	erjury and pursuan	t to the				
	Print Petitioner									
	laws of the State of court to adopt this			ed Parenting Plan, an	d I agree with the	Plan. I ask the				
	Month	Day	_, 20 <u></u>	Petitioner's signa	ture*					
	1/10/11/1	Duy	1047	1 cittoner 3 signa	en c					
	Mailing address () Phone number		City	V	State	ZIP code				
			Email address		Additional email address – if available					
	* Whether filing electronically or in					-				
		an the form after s			on inis jorm. 1j you	are juing				
			Continue	d on next page						

B.

Rule 17.200-Form 229: Agreed Parenting Plan, continued

Respondent's Oath	and Signatu	re				
I, Print Respondent's	пате	, certify	under penal	ty of perjury ar	ıd pursuar	nt to the
laws of the State of lov court to adopt this Agr		•	d Parenting P	Plan, and I agre	e with the	Plan. I ask the
Month	Day	, 20 <u> </u>	Responden	t's signature*		
Mailing address		City			State	ZIP code
() Phone number	\overline{E}	mail address		Additiona	ıl email ac	ddress – if available
* Whether filing electronically, scan th					form. If you	u are filing

Rule 17.200—Form 230: Proposed Parenting Plan

Use this form if you and your spouse do not agree to all child custody and visitation arrangements

Do not use this form if both spouses agree to everything in this plan. Instead, use form 229 to tell the court what you both want your plan to be.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

lı	n the Iowa District C	Sourt for $\frac{1}{C}$	ounty wh	ere you	are filing this Parenting Plan	County
Jpon	the Petition of			Equ	ity case no	
					Proposed Parenting	g Plan
Petitio	oner Full name: first, middle, i	last				
and co	oncerning					
Respo	ondent Full name: first, mi	ddle, last				
am						
Check o	ne					
A.	Petitioner					
B.	Respondent					
l. Inf	formation for the Co	urt				
A.	Children List all children	n born to or a	dopted by	v Petiti	oner and Respondent.	
	First, middle, & last initials of each child	Present age	Geno M	ier F	School	Grade
	(1)		0	\overline{O}		
	(2)		0	O		
	(3)		0	O		
	(4)		0	0		
	(5)		0	O		
	(6)		0	\overline{O}		
	☐ Check this box if you a	re attaching	a separat	e sheet	listing additional children.	
B.	Information about the	children				
	(1) The children liste	ed in A are tl	he only o	hildre	n born to or adopted by these	parents.
					court case. If you check (2), and do custody and visitation.	ttach a copy of th
	• •				lent not listed in B. Explain	
	 If there are chi Respondent, ch 			marria	ge, who are not the children of I	Petitioner or of
	Tesponaon, or	(5) 41101 6				

• If there are children of Petitioner and Respondent, but the parental rights have been terminated, check (3) and explain.

C.	Special	pecial concerns about the children								
	Check al	that are true								
	(1)	Breastfeeding infant								
	(2)	Child with a disability								
	(3)	Other Explain								
D.	Informa	ation about the parents								
	Check al	l that are true								
	(1)	Petitioner receives public assistance, Title XIX, or FIP.								
	(2)	Respondent receives public assistance, Title XIX, or FIP.								
	(3)	Petitioner plans to move within the next year.								
	(4)	Respondent plans to move within the next year.								
	(5) \bigcirc	This is the Parenting Plan for before the move.								
	(6)	This is the Parenting Plan for after the move.								
E.	Special	concerns about the parents								
	Check al	l that are true								
	(1)	Petitioner has an alcohol or drug problem.								
	(2)	Respondent has an alcohol or drug problem.								
	(3)	Petitioner does not have a driver's license.								
	(4)	Respondent does not have a driver's license.								
	(5)	Petitioner's home environment is not suitable. Explain in 11.								
	(6)	Respondent's home environment is not suitable. Explain in 11.								
	(7)	Petitioner is in jail or a mental health institution. Explain in 11.								
	(8)	Respondent is in jail or a mental health institution. Explain in 11.								
	(9)	Petitioner is protected under a Domestic Abuse Protective Order. Explain in 11.								
	. ,	Respondent is protected under a Domestic Abuse Protective Order. Explain in 11.								
	(11)	Explain:								

2. Plan

- A. Read these definitions of legal custody and physical care:
 - (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
 - (3) **Physical care** means providing the main home for the child and taking care of the child.
 - (A) Joint physical care means both parents have equal rights and responsibilities for providing

	the main home for the child and taking care of the child.
B.	Legal custody should be
	Check one
	(1) O Joint legal custody to both parents
	(2) To Petitioner
	(3) To Respondent
	(4) To other person
	Full name of other person: first, middle, last
C.	Physical care should be
	Check one
	(1) \bigcirc To Petitioner If you check (1), use D for Respondent's visitation.
	(2) \bigcirc To Respondent If you check (2), use D for Petitioner's visitation.
	(3) O Joint physical care to both parents If you check (3), use D(12) to explain the joint physical care schedule.
	(4) O To other person
_	Full name of other person: first, middle, last
D.	Visitation Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.
	(1) Visitation for
	Check one
	a. Petitioner
	b. Respondent
	(2) Visitation permission
	Check a, b, or c.
	a. O Visitation should not be allowed because:
	b. Visitation should be supervised because:
cembe	er 2013 Rule 17.200—Form 230 Page 3 of 9

The supervisor for visitation should be _____

Rule 17.200-Form 230: Proposed Parenting Plan, continued

			Supervisor'.	s full name: fir.	st, middle last	
	c. Regular unsupervise Check all that apply	ed visitation so	hedule as t	he parents ag	ree:	
	i. Reasonable visita	tion as the nare	nts agree			
	ii. Mid-week visitatio					
	M Tu W	Th F				
			From	a.m. to	p.m.	
	iii. C Every weekend		\circ	a.m.		a.m.
	From	at	\sim \sim	p.m. to	at	Dp.m.
	Day of week	Tin	ne O	Day of	week T	ime
	iv. Every other weeks From	end		a.m.		□ a.m.
	From	at	□	p.m. to	at	D.m.
		111	ne	Day of	week 1	ıme
	v. Dother Describe					
	vi Visitation will start on				20	
	vi. Visitation will start on _	Month		Day '	Year	
(3)	Detailed holiday schedule					
	This schedule tells on whch holiday	s the children will	be with either	Petitioner or Res	spondent.	
	You do not have to fill in everything		eft blank mear	s the children wi	I spend that day	with the parent
	who already has the children on tha	t day.		P = Petiti	oner R=R	espondent
						Odd years
	Holiday	Tim	е	Every year P R	P R	P R
	New Year's Eve		Q a.m.	$\cap \cap$	\cap	\bigcap
	Thew rears Live	•	O p.m.	$\stackrel{\smile}{\sim}$	\sim	$\frac{9}{2}$
	New Year's Day		O a.m.	\cup	\cup	\mathcal{O}
	Martin Luther King, Jr. Day	:	a.m. p.m.	0	0	0
	President's Day	••	a.m. p.m.	00	0	() ()
	Memorial Day	:	Q a.m. p.m.	00	0	0
	Independence Day July 4th		8 a.m. p.m.	0	0	0
	Labor Day	:	a.m. p.m.	0	0	0
	Veterans' Day November 11th		a.m. p.m.	0	0	0
	Thanksgiving Day	:	O a.m. O p.m.	00	00	0
	Christmas Eve	:	Q a.m.	\bigcirc		\bigcirc
			O p.m.			

(4)

(5)

Rule 17.200-Form 230: Proposed Parenting Plan, continued

Mother	's Day	:	O a.m.	00	00	00	
Father'	's Day	:	O a.m.	00	00	00	
Petition	ner's Birthday	:	O a.m. O p.m.	00	00	00	
Respo	ndent's Birthday	:	O a.m.	00	00	00	
Hallow	een October 31st	:	O a.m.	00	00	00	
Other:	Describe	:	Q a.m. O p.m.	00	00	00	
Other:	Describe	:	O a.m.	00	00	00	
check of a. Check	If a holiday falls on a whole weekend. If a holiday falls on a continue. If a holiday falls on a will continue. This me the children two weeks. Other Explain	Monday or a F Monday or a F eans the parent	riday, the al	ternating weel	kend schedule kend schedule	in 3.a.iii. will in D(2)c.iv.	
Summe Check o. a. O		ondent will ead	ch have one er parent.	e-half of the s The children	ummer schoo will be returne	l vacation	
c. 🔾	The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.						

Continued on next page

Other Explain

(6)	Winter school holiday Check one
	a. Winter school holidays will be divided as Petitioner and Respondent agree.
	b. Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.
	c. Other Explain
(-)	
(7)	Spring school break Check one
	a. Spring school break will be divided as Petitioner and Respondent agree.
	b. Spring school break will be alternated every other year between Petitioner and Respondent.
	c. Petitioner and Respondent will each have one-half of each spring school break.
	d. Other Explain
(8)	The children's birthdays Check one
	a. OPetitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
	b. A child's birthday will be spent with the parent who has the child on that day.
	c. Each child's birthday will be alternated from year to year between Petitioner and Respondent.
	d. Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
	e. Other Explain
(9)	Pick up and drop off
	Check all that apply
	a. O The parents will agree about pick up and drop off for each visit.
	b. The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
	c. Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children,
	only the following people are permitted to help:

1 250: Proposed Parenting Plan, continued
Other arrangements for visitation (for example, Petitioner and Respondent will meet at a location between their residences): Explain
at a location between their residences). Explain
ne parent without the children may contact the children by heck all that apply Calling the children Check one i. At reasonable hours
ii. Any day from S a.m. a.m. p.m.to S p.m. Phone number () Phone number where children can be contacted
Emailing the children at this address: Email where children can be contacted
Other Explain
hanges to the schedule heck all that apply The parties may agree to additional visitation or changes to the schedule. If one parent fails to arrive at the appointed time, then the other parent will wait for at least minutes before cancelling the visit. No changes allowed except by a court order. Other Explain
oint physical care plan se only if both Petitioner and Respondent are given joint physical care. How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children.
How the children's time will be divided between Petitioner and Respondent: You may use sections 3, 4, 5, 6, 7, and 8 for holidays, school breaks, and birthdays.

	C.	How the children's expenses will be paid: and school fees.		ch as clothe	es, activities,
	d.	How Petitioner and Respondent will deal children (including changes due to the ch			nts about the
	e.	Other issues:			
′13\	Pe	solving disagreements			
(13)		eck one			
	Bef	fore going to court to resolve disagreement	s, Petitioner and Respor	ndent will	
	a.	Ask the following person to help them r	esolve disagreements:		
				()	
		Name	Relationship to parties	Phone nur	mber
		Present street address	City	State	ZIP code
	b.	Go to mediation. Do not check if media. or an injunction.	tion will not work because	of domestic	violence

Continued on next page

3.	Attorney Help Check one									
	_		did not help	me prepai	re or	fill in this paper.				
	в. О	An attorney								
	Ŭ	If you check B		-						
		Name of attorn	ney or organiza	ution, if any		Attorney's P.I.N.	# -Ask	the attor	ney	_
		Business addre	ess of attorney	or organizat	ion	City		State	ZIP code	_
		()_	ne numher	_ ()	number – optional	Attor	nov's om	ril address – antion	_ al
4.	Certif	ication of S						,	1	
••	Section	4 to be complete	ed only if filing	in paper or	if the	other party is exem se served on registe			filing.	
	I.				certify	that on			. 20	
	Print	your name		,	001111	that on		\overline{Day}	y Year	_
		d or gave a cop y at this addres		oosed Parei	nting	Plan to the other	party or	the othe	er party's	
	Name o	f person to whor	n I delivered o	r mailed it						
	Party's	or attorney's m	ailing address		City			State	ZIP code	_
5.	This Pr		ting Plan add			y and visitation is make it a part of t			rce. I want the	
	I,			,	certif	y under penalty o	of perjur	y and pu	rsuant to the	
	Prin	t your name								
						sed Parenting Placed Parenting Pla		l agree v	with the Plan and	t
	1.64			, 20	_	Your signature*				_
	Month		Day	Tear		1 our signature				
	Mailing	address			City			State	ZIP code	-
	()								
	Phone r	number		Email addre.	SS	Ā	dditiona	l email ac	ldress – if available	_
		er filing electroni he form after sign				e your signature on ti	his form.	If you are	filing electronically	,
Dec	ember 20	13		Rule 1	7.200-	-Form 230			Page 9 of	9

[Court Order December 19, 2013]

Forms 231 to 300: Reserved

Rules 17.201 to 17.299 Reserved.

Rule 17.300 Forms for modifying child support. The following forms are for use in actions to modify a current child support order from an Iowa court.

Form 301: Application to Modify Child Support

Form 302: Cover Sheet for an Application to Modify Child Support

Form 303: Confidential Information Form

Form 304: Original Notice for Personal Service
Form 304a: Original Notice for Personal Service

Form 305: Acceptance of Service

Form 306: Directions for Service of Original Notice

Forms 307 and 308: Reserved

Form 309: Application and Affidavit to Defer Payment of Costs

Form 310: Affidavit of Service of Original Notice and Application to Modify Child

Support

Form 311: Protected Information Disclosure

Forms 312 to 314: Reserved

Form 315: Answer to Application to Modify Child Support

Form 316: General Answer to Application to Modify Child Support

Forms 317 to 321: Reserved

Form 322: Motion in a Child Support Modification

Form 323: Response to a Motion in a Child Support Modification

Form 324: Child Support Modification Financial Statement

Form 325: Affidavit of Mailing Notice

Form 326: Notice of Intent to File Written Application for Default Decree

Form 327: Request for Relief in a Child Support Modification

Form 328: Settlement Agreement on an Application to Modify Child Support

Forms 329 to 400: Reserved

[Court Order December 19, 2013; March 6, 2014]

Read the Guide to Representing	Yourself in a Child	Support Modification	Case in Iowa 01	n the Iowa Judicial	Branch webs	ite
before using this form.						

- You cannot use this form to change child custody, physical care, or visitation arrangements.
- You cannot use this form if there is no current lowa court order or decree setting child support.
- Use this form only if you want to increase, decrease, or stop child support.
- "Applicant" is the person who files the first paper (an Application) to start a case to modify (change) child support. Applicant could have been either Petitioner or Respondent in the original case.

	If filing electronically	vou must provide any	protected information in	full on form	311
Acres 1	If funit ciecu onicunty,	you must provide unity	pi otectea information ii	i juii on joini.	JI

If filing in paper, you may use form 311 to provide any protected information in full.

n the	lowa District Court for	County of current chi	Could support order
Jpon	the Petition of	Equity case	no(As stated in the current support order)
Petitioner Full name of Petitioner as it is in the original case		—— Арр	lication to Modify Child Support
ind co	oncerning		
ull nam Pe	ondent e of Respondent as it is in the original case ersonal Information Fill in all inf d fear for your safety, you may leave your Applicant's (the party seeking to	street address, phone num	ber, and email blank.
. Pe	ersonal Information Fill in all inference fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last	street address, phone number modify child support) in	ber, and email blank. nformation: Birth year
. Pe	e of Respondent as it is in the original case ersonal Information Fill in all infold fear for your safety, you may leave your Applicant's (the party seeking to	street address, phone num	ber, and email blank. nformation:
. Pe	ersonal Information Fill in all inference fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last	street address, phone number modify child support) in	ber, and email blank. nformation: Birth year
. Pe and A.	ersonal Information Fill in all inference dependent as it is in the original case ersonal Information Fill in all inference dependent of the party seeking to a	street address, phone number modify child support) in City	ber, and email blank. nformation: Birth year State ZIP code
. Pe and A.	ersonal Information Fill in all inference of Respondent as it is in the original case ersonal Information Fill in all inference of fear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last Applicant's present street address County	street address, phone number modify child support) in City	ber, and email blank. nformation: Birth year State ZIP code
iull nam	ersonal Information Fill in all inference dear for your safety, you may leave your Applicant's (the party seeking to Full name: first, middle, last Applicant's present street address County Other parent's information:	street address, phone number modify child support) in City	ber, and email blank. Information: Birth year State ZIP code Email address

February 2014 Rule 17.300—Form 301 Page 1 of 6

Ċ.	. Other person (non-parent) who rec	eives chila	support Chec	k one	
	(1) There is no other person (n	on-parent) w	ho receives c	hild support in	this case.
	(2) There is another person (no	on-parent) w	ho receives cl	nild support in t	this case.
					d fill in below the
	Full name: first, middle, last			Bir	rth year
	Present street address	City		State	ZIP code
	County	()		Em ail a	dduaga
	Courty	<i>Рионе нитое</i>	er .	Етан ас	uress
Ge	eneral Information about this C	ase			
A.	. Current child support order				
	(1) Date the current child support orde	er was entere	ed: <i>Month</i>	Day	, 20 <u></u> Year
	(2) County and state where the order	was entered			
	(2) County and state where the order	was entered	County		State
	(3) Case number on the current child	support orde	r:		
	(4) Person who pays child support in t	his case:	0 1 1 1		
		Nai	me: jirsī, tasī		
	(5) Person who receives child support	in this case	Name: first. la:	st	
	(6) Ourset appoint of shild augment post				
	(6) Current amount of child support pa		k	Frequency	<u> </u>
В.	. Copy of current child support order	Check or	1e		
	· ·		attached.		
	(2) A copy of the current child sup	port order is	not attached.		
C.	. Child Support Recovery Unit (CSR	U) Chec	k one		
	(1) The Child Support Recovery U	Jnit (CSRU) i plicant on page	is involved in the six of this form.	his case. If CS	RU is involved in this
	(2) The Child Support Recovery U	Init (CSRU) i	s not involved	I in this case.	
D.	. Collection Services Center (CSC)	Check one			
	(1) The Collection Services Cente	r (CSC) is in	volved in this	case.	
	The CSC number is:				
	(2) The Collection Services Cente	r (CSC) is no	ot involved in	this case.	
	В	(1)	(1)	(1) There is no other person (non-parent) who receives of If someone other than a parent gets child support in this case, operson's name, year of birth, present residence, and contact information about this Case A. Current child support order (1) Date the current child support order was entered: (2) County and state where the order was entered: (3) Case number on the current child support order: (4) Person who pays child support in this case: (5) Person who receives child support in this case: (6) Current amount of child support order in this case: (7) A copy of the current child support order is attached. (8) A copy of the current child support order is not attached. (9) A copy of the current child support order is not attached. (1) A copy of the current child support order is not attached. (2) A copy of the current child support order is not attached. (3) Case number or the current child support order is not attached. (6) Current amount of child support order is not attached. (7) Child Support Recovery Unit (CSRU) is involved in the case, see the Important Notice to Applicant on page six of this form. (8) Collection Services Center (CSC) is involved in this The CSC number is:	(2)

E.	Other child support ord	ders Check on	e		
	(1) There are no oth	er child support	orders for the	e child or children involved	in this case.
	(2) There are other	child support ord	ers for the ch	nild or children involved in	this case.
	They are:				
	Case Number		Co	unty	State
	Case Number		Co	unty	State
	☐ Check thi orders.	is box if you are at	ttaching a sep	arate sheet listing additional	child support
F.	The following children	are covered by	the current	child support order:	
	First, middle, & last initials of each child	Birth year		First, middle, & last initials of each child	Birth year
	(1)			(4)	
	(2)			(5)	
	(3)		1	(6)	
	☐ Check this box if you h	ave attached a sep	ם parate sheet li.	sting additional children.	
_		_			
G.			•	cause Check all that a here the child or children	
	The person payir	ng support has c	ustody of the	e children.	
	If you check (1) , w	rite the county wh	ere the juveni	le court order was entered a	nd the case number.
	County			Case Number	
	•	he children live v	vith the pare	nt who is paying support.	
	There is no court	t order that sets o	up custody.		
	(3) ☐ One or more of t(4) ☐ My (Applicant's)			for child support.	
	(5) Respondent's (o	_		ne up.	
	(6) ☐ Other reason Ex	cplain			
	-				
Н.	Child support amount		Check all that		
	(2) Lowered Explain	ı			
	(3) Stopped Explain	!			

(1)	I.	Tax deduction for the children Check (1) or (2)					
If you check (2), check a or b: a.		(1) There is no court order at this time on tax deductions for the children.					
should stay the same. b. A court order currently says who gets the tax deduction for the child or children and it should be changed. Explain J. Health care expenses for the children Check (1) or (2) (1) There is no court order at this time on who pays health care expenses. (2) There is a court order at this time on who pays health care expenses. If you check (2), check a or b: a. A court order currently says who pays for health care expenses for the child or children and it should stay the same. b. A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) In the military service (2) In prison or jail at Name of facility L. Protective or no contact order Check (1) or (2) (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County County State		—					
J. Health care expenses for the children Check (1) or (2) (1)			t				
 Check (1) or (2) (1) ☐ There is no court order at this time on who pays health care expenses. (2) ☐ There is a court order at this time on who pays health care expenses. If you check (2), check a or b: a. ☐ A court order currently says who pays for health care expenses for the child or children and it should stay the same. b. ☐ A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) ☐ In the military service (2) ☐ In prison or jail at Name of facility L. Protective or no contact order Check (1) or (2) (1) ☐ There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) ☐ There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County 			ţ				
 Check (1) or (2) (1) ☐ There is no court order at this time on who pays health care expenses. (2) ☐ There is a court order at this time on who pays health care expenses. If you check (2), check a or b: a. ☐ A court order currently says who pays for health care expenses for the child or children and it should stay the same. b. ☐ A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) ☐ In the military service (2) ☐ In prison or jail at Name of facility L. Protective or no contact order Check (1) or (2) (1) ☐ There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) ☐ There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County 			_				
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(2) There is a court order at this time on who pays health care expenses. If you check (2), check a or b: a. A court order currently says who pays for health care expenses for the child or children and it should stay the same. b. A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) In the military service (2) In prison or jail at in Name of facility L. Protective or no contact order Check (1) or (2) (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State	J.						
If you check (2), check a or b: a. A court order currently says who pays for health care expenses for the child or children and it should stay the same. b. A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) In the military service (2) In prison or jail at Name of facility L. Protective or no contact order Check (1) or (2) (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State		(1) There is no court order at this time on who pays health care expenses.					
children and it should stay the same. b. A court order currently says who pays for health care expenses and it should be changed. Explain K. The other party is Check each that is true (1) In the military service (2) In prison or jail at		• • • • • • • • • • • • • • • • • • • •					
K. The other party is Check each that is true (1)							
Check each that is true (1)							
Check each that is true (1)			-				
Check each that is true (1)			_				
Check each that is true (1)			_				
(2)	K.	• •					
Name of facility L. Protective or no contact order Check (1) or (2) (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State		\cdot					
 L. Protective or no contact order Check (1) or (2) (1) There is no "protective order" or "no-contact order" between any of the parties and me (Applicant). (2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State 							
(Applicant). (2) ☐ There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State	L.	Protective or no contact order					
(2) There is a "protective order" or "no-contact order." If you check (2), fill in the following information: a. County and state where the order came from: County State		(1) There is no "protective order" or "no-contact order" between any of the parties and me					
If you check (2), fill in the following information: a. County and state where the order came from: County State		(Applicant).					
County State							
b. Court case number:			_				
		b. Court case number:					

٨ŀ	plic	ant	i's Request
٩.	Ap	plica	ant asks the court to:
	Che	eck a	all that apply. The court will only consider items that are checked.
	(1)		Raise the current child support payment.
	(2)		Lower the current child support payment.
	(3)		End the current child support payment.
	(4)		Set child support for the parent who does not have the children.
	(5)		Change who gets the tax deduction for the child or children.
	(6)		Change who pays for health care expenses for the child or children.
	(7)		Order that the other party pay the court fees.
	(8)		Order that the other party pay my attorney fees.
	(9)		Other request:

Continued on next page

4.	Attor Check	ney Help one					
	A. 🗌	An attorney	did not help ı	me prepare o	r fill in this paper	r.	
	В. 🗌	-		repare or fill in the following in			
		Name of attorn	ey or organizat	tion, if any	Attorney's P.I.N	L# - Ask the attorn	ney
		Business addre	ss of attorney o	or organization	City	State	ZIP code
		() Attorney's pho	ne number	_ () Attorney's fo	x number – optional	Attorney's ema	iil address – optional
5.	Servi	ce Instructio			•	·	•
•		A or B only if Ap	-	•	lectronically		
	A. 🗌	Applicant wi	l accept serv	rice of docum	ents at the attor	ney's address li	sted above; or
	В. 🗌				nts in this case a	-	
6.	Oath	and Signatı	ıre				
	1			have re	ad this Annlicati	on and I certify	under nenalty
	Print	your name		, navo ro	ad this Applicati	on, and rocking	under penalty
					e of lowa that th	e information I I	have provided
	in this	Application is					
	Signed	on: Month	Day	_, 20	Your signature*		
	Mailing	g address		7	lity	State	ZIP code
	()		l address	4.4	ditional email addi	uses if small salts
	I none i	numver	Email	i uuuress	Au	атопа етан ааа	ess, ij applicable
		her filing electroni the form after sign			ite your signature on	this form. If you are	filing electronically,
				Important N	lotice to Applic	ant	
		•	See next p	page for instru	uctions for filing	an Application.	
		•	You must parties.	serve this Ap	plication and an	Original Notice	on the other
		•	•	d Support Re	covery Unit (CSI	RU) is involved i	in this case,
					th forms on CSF	,	,

See the Guide to Representing Yourself in a Child Support Modification Case in lowa for information on serving papers. Instructions for Rule 17.300-Form 301: Application to Modify Child Support, continued

Do not file these instructions

Instructions for Filing an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically, even if your original case was in paper, unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Application electronically

- If you are filing your Application in a county that uses electronic filing, you must register to
 electronically file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented) for eFiling.</u>
- After you have registered, log in to the electronic filing system to electronically file your Application.
- For help electronically filing your Application, see <u>How to eFile a New Case</u>.
- With your Application, you must also file an Original Notice (304) and a Protected Information Disclosure (311).
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling
 of your Application and other documents.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your filing. For help, see <u>How to Resubmit a Returned Filing</u>.
- Log in to your eFile account and download and print your Application and Original Notice so that you
 can serve it on (deliver it to) the other party.
- For help finding and downloading your Application and Original Notice, please see <u>My Filings</u>
 <u>Reference Guide</u>.

Filing your Application in paper

- If the county where you will be filing your Application does not yet accept electronic filing, you must
 proceed in paper. If the county does accept electronic filing, you must proceed electronically, unless
 you have received permission from the court to file in paper.
- With your Application (301), you must also file an Application Cover Sheet (302), an Original Notice (304a), and a Confidential Information Form (303).
- Forms 301 and 304a: Make two photocopies if you can deliver copies of these forms to the other party
 in-person or by mail. Make three photocopies if you are going to ask the county sheriff or a civil
 process server to deliver these forms to the other party.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
 must also provide each form you file to the CSRU office that serves the county where your child
 support case is filed.
- Forms 302 and 303: You do not have to make photocopies of these forms.

Instructions for Rule 17.300-Form 301: Application to Modify Child Support, continued

- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing an Application to Modify Child Support.
- Give the clerk at the counter these forms:
 - 301 Application to Modify Child Support
 - 302 Coversheet for an Application to Modify Child Support
 - 303 Confidential Information Form (Do not make copies of this form.)
 - 304a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 309.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees
 and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (304a). You will have to serve this form on (deliver it to) the other party.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.300—Form 302: Cover Sheet for an Application to Modify Child Support.

Applicant uses this form for j	paper filing only; do not f	file in electronic cases.		
For court use only	aber	County where case is filed	d	-
Applicant				
Applicant's first name	Middle name	Last name		-
Street address		City	State	ZIP code
() Phone number	 Email addres:	s		
Case name				
Petitioner's first name	Middle name	Last name		-
vs.				
Respondent's first name	Middle name	Last name		_
Nature of the Case:	EQUITY—Domest	tic Relations dren involved (CD-DC)		
	252A—Support action	. (22.20)		
	252A.18—Foreign sup			
	252B.11—Cost recove 252C—Administrative			
	252D—Income withhol			
	252E—Medical suppor	• ,		
	252K—UFISA (DR-R1)			

Note to Applicant

- Applicant must complete this cover sheet if filing in paper and give it to the district court clerk when filing an Application to Modify Child Support.
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- For electronic filers: You do not have to file this form. This information is automatically generated when you submit your documents electronically.

Rule 17.300—Form 303: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. Each party's completed form will be kept confidential by the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ln	the Iowa District Court for	County where Appli	County where Application is filed		
Up	oon the Petition of	Equity case	no		
	etitioner I name of Petitioner as it is in the Application	Confid	lential Information Form		
an	d concerning				
	espondent I name of Respondent as it is in the Application				
1.	Applicant's Information				
	Full name: First, Middle, Last	Birth date	Social Security number		
2.	Other Party's Information	, ,			
	Full name: First, Middle, Last	Birth date	Social Security number		
3.	Children's Information				
	A. Child 1:				
	Full name: First, Middle, Last	Birth date	Social Security number		
	B. Child 2:				
	Full name: First, Middle, Last	/ /	Social Security number		
	C. Child 3:	, , ,	·		
	Full name: First, Middle, Last	Birth date	Social Security number		
	D. Child 4:				
	Full name: First, Middle, Last	/ / / Birth date	Social Security number		

Rule	17.300—Form 303 Confidential Information Form, co	ntinued			
	E. Child 5:				
		/	/		
	Full name: First, Middle, Last	Birth date	Soci	al Security number	?r
	☐ Check this box if you have attached a s	separate sheet listing a	dditional children.		
	Cinnertons of Burnislan of Information	4:			
4.	Signature of Provider of Inform				
The party or parties submit this information in compliance with the court's Order and with used to enforce any support order under the Code of Iowa, chapters 234, 252A, 252C, 2 provided for in section 598. If a party's address or employment changes, the party must information with the clerk of court or the Child Support Recovery Unit.				2H, 252K, or 600B, a	as
	Information provided by:				
	Print your f	ull name: first, middle,	last		
				20	
	Your signature	Month	Day	Year	

Important Notice

Do not give copies of this form to anyone except the clerk of court.

December 2020

Rule 17.300—Form 304: Original Notice for Personal Service

	Applicant must serve the	Application on the other	party within 90 da	ys after filing the Application.
--	--------------------------	--------------------------	--------------------	----------------------------------

Failure to meet this deadline may result in the court dismissing the Application.

Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website for additional important instructions.

- If filing electronically, Applicant must complete this form.
- If filing in paper, Applicant must use form 304a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n the Iowa Distric	t Court for		Cou
		County where	e Application is filed
Jpon the Petition	of		Original Notice for Personal Service
Petitioner ull name of Petitioner as it is i	1 the Application	-	reisoliai service
nd concerning			
Respondent ull name of Respondent as it is	in the Application	-	
-o:			
Petitioner or Respo	ondent		
Other person recei	ving child support in this case	e, if any.	
	t Recovery Unit is involved in Recovery Unit" on the secon		
A copy of theApplicant is n		nild Support (f orney.	asking for a change in child support form 301) is attached to this Notice tion case:
Applicant's name			
Mailing address	City	State	ZIP code
()			_
Phone number	Email address	,	

For party receiving this Original Notice: Important instructions on next page

February 2014 Rule 17.300—Form 304 Page 1 of 3*

*Upon electronic filing, a clerk's signature page will be attached to this document as page 3.

Rule 17.300—Form 304: Original Notice for Personal Service, continued

Instructions to Party Receiving the Original Notice

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Applicant what he or she asked for in the Application.
- B. For help in this case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "Court Rules & Forms" or on "For the Public."
- C. If you received Application form 301, you may use Answer form 315.
- D. This case has been filed in a county that uses electronic filing. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16
 Pertaining to the Use of the Electronic Document Management System, available on the Iowa Judicial
 Branch website.
 - For court rules on the Protection of Personal Privacy in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file in paper.
 Contact the clerk of court in the county where the Application was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Applicant. A Notice of Electronic Filing (NEF) will tell you if the court has excused Applicant from electronic filing. If the court has excused Applicant from electronic filing, you must mail a copy of your Answer or Motion to Appliant.

Important Notice

You should talk to an attorney at once to protect your interests.

Rule 17.300—Form 304a: Original Notice for Personal Service

Applicant must serve the Application on the other party within 90 days after filing the Application. Failure to meet this deadline may result in the court dismissing the Application. Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website for additional important instructions. If filing electronically, Applicant must complete form 304. If filing in paper, Applicant must use this form (304a). If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for County County where Application is filed Upon the Petition of Original Notice for **Personal Service** Petitioner Full name of Petitioner as it is in the Application and concerning Respondent Full name of Respondent as it is in the Application To: Petitioner or Respondent Other person receiving child support in this case, if any. If the Child Support Recovery Unit is involved in this case, list "Child Support Recovery Unit" on the second line. Applicant (the party bringing this case) has a lawsuit asking for a change in child A copy of the Application to Modify Child Support (form 301) is attached to this Notice. Applicant is not represented by an attorney. Applicant's contact information during this modification case: Applicant's name Mailing address City ZIP code State Phone number Email address

Important instructions on next page

If you need assistance to participate in court due to a disability, contact the disability coordinator at: (_____) Persons who are hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). Disability coordinators cannot provide legal advice. Disability coordinator contact information available at: http://www.iowacourts.gov/Administration/Directories/ADA_Access/.

Rule 17.300-Form 304a: Original Notice for Personal Service, continued

Instructions to Party Receiving this Original Notice

- You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Application. If you do not file an Answer or Motion within 20 days after receiving this Application, the court may enter a judgment against you giving Applicant what is asked for in the Application.
- If you received Application form 301, you may use Answer form 315.
- After you file your Answer or Motion, you must serve a copy of it on Applicant.

(SEAL)		
	Clerk of Court	
		County Courthouse
		, lowa
	City	ZIP code

Important Notice

You should talk to an attorney at once to protect your interests.

Rule 17.300—Form 305: Acceptance of Service

Applicant must complete this section:

	County where Application is file	d	County
Upon the Petition of	Equity case no		
Petitioner Full name of Petitioner as it is in the Application	_ Acceptance	of Servi	ce
and concerning			
Respondent Full name of Respondent as it is in the Application	_		
Applicant must file this form with clerk of court soon a	fter the other party signs it.		
Acceptance of Service, Oath, and Sign If the other party completes this Acceptance of Service,	ature of Other Party	o Applicant	soon after
Acceptance of Service, Oath, and Sign If the other party completes this Acceptance of Service, signing it. Applicant will file it with the clerk of court.	ature of Other Party		v
Acceptance of Service, Oath, and Sign If the other party completes this Acceptance of Service, signing it. Applicant will file it with the clerk of court. I,	ature of Other Party the or she must return this form to , am the other party in this n for this case. I have read pursuant to the laws of the	case. I re this Acce State of le	eceived a
Acceptance of Service, Oath, and Sign If the other party completes this Acceptance of Service, signing it. Applicant will file it with the clerk of court. Print your name copy of the Original Notice and the Applicatio Service. I certify under penalty of perjury and information I have provided in this Acceptance. , 20	ature of Other Party the or she must return this form to , am the other party in this n for this case. I have read pursuant to the laws of the	case. I re this Acce State of le	eceived a
copy of the Original Notice and the Applicatio Service. I certify under penalty of perjury and information I have provided in this Acceptanc	ature of Other Party he or she must return this form to , am the other party in this n for this case. I have read pursuant to the laws of the e of Service is true and corr	case. I re this Acce State of le	eceived a

Important Notice

By signing this form, you are not agreeing to what Applicant wants. You are only agreeing that you received a copy of the Original Notice and Application.

Rule 17.300—Form 306: Directions for Service of Original Notice

Applicant must complete this form if the sheriff or a process server will deliver the Application and Original Notice to the other party.

Do not use this form if the other party has already received the Application and Original Notice.

Do not file this form with the clerk of court in paper or electronically.

Give this form to the sheriff or other process server with your Application (301) and Original Notice (304 if electronically filing or 304a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Сои	ntv wher	e Application is filed	Equity case number		
	-		f or Other Process Serve	r	
•		ne and fill in the blanks		•	
	A. 🗆	Sheriff In county where the oti	her party will be served		
			County		
		Street address	City	State	ZIP code
	В. 🗌	Other process server			
		Name of other process server see	rving the Notice		
		Street address	City	State	ZIP code
2.	Perso	n to be Served			
			()		
	Other p	arty's name	Phone number		
	Address	where the other party can be set	ved City	State	ZIP code
3.	Perso	n Requesting Service			
	77 / /	7:			
	Your (A)	pplicant's) name	Phone number		
	Your (A)	pplicant's) present mailing addre	ess City	State	ZIP code
4.	Speci	al Instructions for Serv	ice Provide information that will	help the sheriff o	r process server.
			v		•
			Continued on next page		

Rule 17.300—Form 306: Directions for Service of Original Notice, continued

5.	Costs of Service Check one				
	A. Applicant will pay the costs of the Sheriff or other process server. If you cannot afford the costs, file form 309.				
	B. Costs for Sheriff deferred by court order:	Clerk of court: Sign only if costs deferred by court order			
6.	Notification After completion of service, the sheriff or other procrequesting service.	cess server will notify the person			
	Date signed: Month Day Year	Your signature			

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs

Applicant uses this form only if Applicant cannot afford to pay the fees to file and serve the Application.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.

Costs and fees paid to someone other than the court or sheriff cannot be waived.

If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for County County where Application is filed Upon the Petition of Equity case no. **Application and Affidavit to Defer Payment of Costs** Petitioner Full name of Petitioner as it is in the Application and concerning Respondent Full name of Respondent as it is in the Application 1. Request A. My name is _ B. For my Application and Affidavit, I state that: Check all that apply (1) I am unable to pay the filing fee or service costs or other court costs. (2) \(\subseteq \) I ask the court for permission to proceed without prepayment of costs and fees. (3) I am filing this Application and Affidavit in good faith. (4) I believe I am entitled to what I am asking for in this case. C. Household There are _ people living in my household. Number D. My household income is \$ _____ per month. Put the total amount of all income and benefits before deductions for all members of your household. E. My income comes from: List the sources of your income. Examples: salary, wages, or benefits such as unemployment, Title 19, FIP.

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs, continued

F.	My household has th	e following monthly expenses:
	(1) Rent or mortgage	\$
	(2) Utilities	\$
	(3) Phone	\$
	(4) Food	\$
	(5) Transportation	\$
G.	I have \$	in cash, checking, and savings,

Continued on next page

2. Attorney Help

Rule 17.300—Form 309: Application and Affidavit to Defer Payment of Costs, continued

	Name of attor	ney or organ	nization, if any	\overline{At}	torney 's P.I.N.	# - Ask the attor	ney
	Business addr	ess of attorr	ney or organiza	ution Ci	ty	State	ZIP code
	() _ Attorney's pho	one number	(Attorne	ey's fax nur	nber – optional	Attorney's em	ail address – o _l
Section	ication of \$3 to be complete cument, if filed	ted <mark>only if fi</mark>	ling in paper o	or if the oth	er party is exe	mpt from electron stered parties.	ic filing.
			•		_	-	20
I,	vour name			, certify tr	Month	\overline{Da}	, 2U
I maile at this Name o	d or gave a coaddress: f person to who	om I delivere	d or mailed it	City	to the other	party or the othe $\frac{1}{State}$	ZIP code
I maile at this Name of Party's	f person to who	om I delivere nailing addre	ed or mailed it	City		State	ZIP code
I maile at this Name of Party's	f person to who	om I delivere nailing addre	ed or mailed it	City			ZIP code
I maile at this Name of Party's Oath I, the Sta	f person to who or attorney's m and Signat Print your r ate of lowa the	om I delivere nailing addre ture name at I have re	ed or mailed it ess , certify ead this Appl d Affidavit is	City under per ication an	nalty of perju d Affidavit al correct.	State	ZIP code
I maile at this Name of Party's Oath I, the Sta	f person to who or attorney's m and Signat Print your r ate of lowa the	om I delivere nailing addre ture name at I have re	ed or mailed it	City under per ication an	nalty of perju d Affidavit al correct.	State ry and pursuant	ZIP code
I maile at this Name of Party's Oath I, the Staprovid Signed	f person to who or attorney's m and Signat Print your r ate of lowa the	om I delivere nailing addre ture name at I have re	ed or mailed it ess , certify ead this Appl d Affidavit is	City under per ication an	nalty of perju d Affidavit al correct.	State ry and pursuant	ZIP code

Rule 17.300—Form 309

February 2014

[Court Order March 6, 2014]

Rule 17.300—Form 310: Affidavit of Service of Original Notice and Application to Modify Child Support

Applicant: Use this form only if someone other than Applicant (you), or a person who is not a sheriff or a process server, delivered a copy of the Application to the other party.

- The person, other than Applicant, who gave the Application and Original Notice to the other party, fills in this form.
- Applicant, or the person who gave the Application and Original Notice to the other party, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa Dist	rict Court for	County where Appl	lication is filed	County
Up	oon the Petition of		Equity ca	se no	
Pe	titioner Full name: first, mi	ddle, last		avit of Service of and Application	n to Modify
an	d concerning			Child Suppo	ort
Re	espondent Full name: fin	st, middle, last	_		
 1.	Affidavit				
	1		delivered a	copy of the Origin	al Notice and
	I,Name of person – Can	not be Applicant, sheriff,	or process server	oopy or the origina	ar rection area
	Application to Modify	Child Support for th	is case to:		Check one
					☐ a.m.
		on		. 20 at	□ p.m.
	Name of Other Parent	Mon	th Do	ay , 20 at Year	Time
	by handing the other p	party copies of the	attached papers.		
_	Ooth and Cinnetum				
2.	Oath and Signature To be completed by the per		lication to the other	nartv	
					والمستعدد المستعدد
	l, Print your name		, nave read ti	nis Amaavit of Ser	vice, and i certify
	•	mr and murauant to	the level of the C	tata af lawa that th	a information l
	under penalty of perju have provided in this A				ie information i
	•			ot.	
	Signed on: Month	, 20			
	Signed on: Month	Day Year	Your signature*		
	Mailing address		City	State	ZIP code
	() Phone number	Email address		Additional email ad	ldress – if applicable
	* If you are filing electronical	lly, scan the form after si	gning it and then file e	lectronically.	
		D. J.	. 47 200 Farm 240		Dama 4 -54
rep	ruary 2014	Rule	17.300—Form 310		Page 1 of 1

Rule 17.300—Form 311: Protected Information Disclosure

It is the responsibility of counsel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Applicant must complete this form (311) and file it with the Application (301) and Original Notice (304).
- The other party must complete this form if adding or correcting protected information.
- Paper filers also may use form 311 to assist in complying with Iowa Rule of Civil Procedure 1.422.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for	County
C	ounty where Application is filed
Upon the Petition of	Equity case no
Petitioner Full name of Petitioner as it is in the Application and concerning	Protected Information Disclosure
Respondent Full name of Respondent as it is in the Application	

For electronic filers:

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in non-confidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules Pertaining to the Use of the Electronic Document Management System, Division VI, Protection of Personal Privacy. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Middle

Name

First

Protected Information Type Complete Information Redacted Information (See Rules 16.602 and 16.604) (See Rule 16.605) A. Social security number XXX-XX-XXXX Last four digits only B. Financial account numbers Full account number Partial account number only C. Date of birth mm/dd/yyyy Year only D. Individual taxpayer identification numbers XXX-XX-XXXX Last four digits only

Last

Rule 17.300—Form 311: Protected Information Disclosure, continued

E.	Personal identification numbers	Full number	Partial only
F.	Other unique identifying numbers	Full number	Partial only
G.			
	Additional protected information	Full information	Partial information
H.			
	Additional protected information	Full information	Partial information
I.			
	Additional protected information	Full information	Partial information
J.			
	Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

2. Respondent

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

Name		
First	Middle	Last

Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ / mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E. Personal identification numbers	Full number	Partial only
F. Other unique identifying numbers	Full number	Partial only
G.		
Additional protected information	Full information	Partial information
H.		
Additional protected information	Full information	Partial information
I.		
Additional protected information	Full information	Partial information
J.		
Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Rule 17.300—Form 311: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

First	Middle	Last
Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	
A. Social security number	 XXX-XX-XXXX	Last four digits only
B. Financial account numbers	Full account number	Partial account number only
C. Date of birth	/ / mm/dd/yyyy	Year only
D. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
E. Personal identification numbers	Full number	Partial only
F. Other unique identifying numbers	Full number	Partial only
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
l. Additional protected information	Full information	Partial information

Partial information

4. Children

Additional protected information

Provide the complete version of protected information here, and the redacted version should be included in documents you file.

A.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

Full information Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.300—Form 311: Protected Information Disclosure, continued

B.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
	(3) Date of birth	/ / /mm/dd/yyyy	Year only

C.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ mm/dd/yyyy	Year only

D.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ mm/dd/yyyy	Year only

E.	Protected Information Type	Complete Information (See Rules 16.602 and 16.604)	Redacted Information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ mm/dd/yyyy	Year only

Check this box if you are attaching a separate sheet listing additional children.

Continued on next page

Month

Date information provided

Rule 17.300—Form 311: Protected Information Disclosure, continued

 \overline{Day}

5. Information provided by:

		/s/		
Handwritten signature of party or attorney if filing in paper		Electronic s if filing elec	ignature of par tronically	ty or attorney
Law firm, if applicable				
Mailing address	City		State	ZIP code

Email address Additional email address, if applicable

Year

Rule 17.300—Form 311

February 2014

Forms 312 to 314: Reserved

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

Use this Answer form 315 if you received Application form 301, otherwise use form 316.

Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- If filing in paper, you may use form 311 to provide any protected information in full..

If you do not understand how to use this form, or if you	should use this form, talk to an attorney.
In the Iowa District Court for	County where Application is filed
Upon the Application of	Equity case no
Petitioner Full name of Petitioner as it is in the Application	_ Answer to Application to Modify Child Support
and concerning	
Respondent Full name of Respondent as it is in the Application	-
Personal Information Fill in all information A. Applicant's (the party seeking to mod # paragraph 1.5 of the Patition (for	•
_	ent residence, and contact information are correct in the
(2) Applicant's name, birth year, prese Application.	ent residence, and contact information are not correct in th
The correct information is:	
Full name	Birth year
Present street address	City State ZIP code
County (Ph	one number Email address

	B.	Your (other parent's) information If paragraph 1B of the Petiti		not correct, ch	eck (2) and fill in	the blanks.	
		(1)	Your (other parent's) name	e, birth year, pre	sent residence	, and contact info	rmation are corr	ect
			in the Application.					
		(2)	Your name, birth year, pres	sent residence,	and contact inf	ormation are not	correct in the	
			Application.					
			The correct information is	:				
			Full name		-	Birth j	vear	
			Present street address	Ci	ity	State	ZIP code	
				()			
			County	Phone num	ber	Email ad	ldress	
	C.	Other	person (non-parent) who	receives chil	d support	Check one		
		(1)	There is no non-parent wh	ho gets child su	pport in this c	ase.		
		(2)	There is a non-parent who	o gets child sup	port in this ca	se.		
		If y	ou check (2) check a or b.					
		a.	The information about t Application.	the other person	who receives ch	ild support is corr	ect in the	
			 If you check a skip to 	2.				
			• If paragraph 1C of t		form 301) is not	t correct, check b	ınd fill in the bla	nks.
		b.	The information about the Application. The correct			ild support is not	correct in the	
		\overline{Fui}	ll name: first, middle, last				th year	
			•				,	
		\overline{Pre}	esent street address	City		State	ZIP code	
				()			
		Con	unty	Phone num	ber	Email ac	ldress	
2	C •	noral	Information about thi	ic Coco				
2.				is Case				
	Α.		nt child support order	Forma 201) is so at	anneat aleadele	and fill in the black	u lea	
			graph 2A of the Application (f		отесі, спеск в	ana jiii in ine oia	aks.	
		(1) Da	te order entered Check one The Application provide		ate of the child :	support order		
		b.	☐ The Application does n				rder. The corre	st.
		D.	date is:	ior bioxide rile C	oneol dale of li	ie oriiia support o	rder. THE COITE	JL
			Month	Dan	Vaar			
			Month	Day	Year			

Rule 17.300-Form 315: Answer to Application to Modify Child Support, continued (2) County and state where the order is entered Check one a.

The Application provides the correct county and state of the current child support order. b. The Application does not provide the correct county and state of the current child support order. The correct county and state is: County State (3) Case number of the current child support order Check one a.

The Application provides the correct case number of the current child support order. b. The Application does not provide the correct case number of the current child support order. The correct case number is: Case number (4) Person who pays child support Check one a.

The Application provides the correct name of the person who pays child support in this The Application does not provide the correct name of the person who pays child support in this case. The correct name is: Name: first, last (5) Person who receives child support Check one a.

The Application provides the correct name of the person who receives child support in this case. b.

The Application does not provide the correct name of the person who receives child support in this case. The correct name is: Name: first, last (6) Current amount of child support paid a.

The Application provides the correct name of the person who receives child support in this case. The Application does not provide the correct name of the person who receives child support in this case. The correct amount is: Frequency Amount B. Copy of current child support order Check one

(1) A copy of the current child support order was attached to the Application.
(2) A copy of the current child support order was not attached to the Application.

	Cilia S	upport Recovery Unit (CS	SRU) Check	one	
	(1)	The Child Support Recover	y Unit (CSRU) is	involved in this case.	
	(2)	The Child Support Recover	y Unit (CSRU) is	not involved in this case.	
D	Collecti	on Services Center (CSC	Check one		
٠.		The Collection Services Ce		volved in this case	
	, ,			cived in this edge.	
		The CSC number is:		A through the Alaba and a	
	(2) 📙	The Collection Services Ce	nter (CSC) is not	t involved in this case.	
E.	Other c	hild support orders Che	eck one		
	(1)	There are no other child su	pport orders for t	he child or children involved	d in this case.
	(2)	There are other child suppo	ort orders for the	child or children involved in	this case.
		They are:			
		Case Number		County	State
		Case Ivanie of			Section
		Case Number		County	State
		☐ Check this box if you	are attaching a se	parate sheet listing additional	l child support
		orders.	J		
F.	Childrer	orders.		Check one	
F.	(1)		support order		child support
F.	(1)	orders. n covered by current child The Application correctly ide	support order entifies the child	ren covered by the current one children covered by the c	current child
F.	(1)	orders. n covered by current child The Application correctly ide order. The Application does not co	support order entifies the child	ren covered by the current one children covered by the c	current child
F.	(1)	orders. In covered by current child of the Application correctly ideal order. The Application does not consupport order. The followin First, middle, & last	support order entifies the child prectly identify the godildren are co	ren covered by the current one children covered by the covered by the current child so First, middle, & last	current child support order:
F.	(1)	orders. In covered by current child The Application correctly ideorder. The Application does not consupport order. The followin First, middle, & last initials of each child	support order entifies the child prectly identify the godildren are co	ren covered by the current of the children covered by the current child sovered by the current covered by the current child sovered by the current child so covered by the c	current child support order:
F.	(1)	orders. In covered by current child The Application correctly ideorder. The Application does not consupport order. The followin First, middle, & last initials of each child (a)	support order entifies the child prectly identify the godildren are co	ren covered by the current of the children covered by the current child sovered by the current covered by the current child sovered by the c	current child support order:

G.	Αm	nour	nt of	child support
	(1)	Ju	/enil	e court order If you check a, check i or ii
		a.		It is correct that there is a juvenile court order that changed where the child or children were living. The person paying support has custody of the children.
			İ.	☐ The county and case number are correct in the Application.
			ii.	☐ The county and case number are not correct in the Application.
				If you check ii, provide the correct information below
				The correct information is:
				County Case number
		b.		There is no juvenile court order that gives care of the child to the party paying support.
	(2)	Wh	o ch	ildren live with <i>Check</i> a <i>or</i> b
		a. b.		It is correct that one or more of the children now live with the person paying support. None of the children now live with the person who is ordered to pay support.
	(3)	Qu	alify	ing for child support Check a or b
		a.		It is correct that one or more of the children no longer qualify for child support.
		b.		There has been no change in the number of children who qualify for child support.
	(4)	Δn	nlica	nt's income Check a or b
	(-')	a.		I agree that Applicant's income has gone down.
		b.		I do not agree that Applicant's income has gone down.
	(5)		inco	ome Check a or b
	(-)	a.		I agree that my income has gone up.
		b.		I do not agree that my income has gone up.
	(6)		resi	ponse to Applicant's "other reason" for requesting a change in child support:
	()	,	'	
		_		
		_		
		_		
Н.	Ch	ild s		oort amount should be Check all that apply
	(1)		Rai	sed Explain
	(2)		Lov	vered Explain
	(3)		Sto	pped Explain
	(4)		Not	t be changed Explain

I.	lax d	edu	Ction for the children $Check(1) or(2)$	
	(1)	Th	ere is no court order at this time on tax deductions for the children.	
	(2) [] <i>If</i> :		here is a court order at this time on tax deductions. Sheck(2), $Sheck(3)$ or $Sheck(3)$	
	a.		A court order currently says who gets the tax deduction for the child o should stay the same.	r children and it
	b.		A court order currently says who gets the tax deduction for the child o should be changed. <i>Explain</i>	r children and it
		_		
J.	Healtl	n ca	re expenses for the children $Check(1) or(2)$	
	(1)		nere is no court order at this time on who pays health care expens	ses.
	`		nere is a court order at this time on who pays health care expense	
			rheck (2), check a or b:	
		a.	A court order currently says who pays for health care expenses for children and it should stay the same.	or the child or
		b.	A court order currently says who pays for health care expenses a be changed. <i>Explain</i>	nd it should
K.			r party) am Check each that is true the military service	
	(2)	In	prison or jail at in	
			Name of facility State	
L.	Protec	ctive	or no contact order Check (1) or (2)	
	(1)		ere is neither a "protective order" nor a "no contact order" between me and	l Applicant.
	(2)		here is a "protective order" or "no contact order" between me and Applicant. wou check (2), fill in the following information:	
		a.	County and state where the order came from:	<u> </u>
			County	State
		b.	Court case number:	

3. I (the other parent) deny anything in the Application that I have not agreed is correct.

4. My (the other parent's) Request

١.	I ask the court to:
	Check all that apply. The court will only consider items that are checked.
	(1) Dismiss the Application to Modify Child Support and leave child support as is.
	(2) Raise the current child support payment.
	(2) Lower the current child support payment.
	(3) Stop payment of child support completely.
	(4) Set child support for the parent who does not have the children.
	(5) Change who gets the tax deduction for the child or children.
	(6) Change who pays for health care expenses for the child or children.
	(7) Order that Applicant pay the court fees.
	(8) Order that Applicant pay my attorney fees.
	(9) ☐ Other request:

Continued on next page

	1 Am attausas	والمطاعمة لمثلم		av fill in this name.	_		
	_	•		or fill in this pape	r.		
В	J An attorney If you check B,	-		Il in this paper.			
	ij you check D,	, you musi jiu	in the jouowing	s ingormation.			
	Name of attorn	ney or organiz	ation, if any	Attorney's P.I.N	√. # − Ask the	attorne	ey .
	Business addre	ess of attorney	or organizatio	n City	Sto	ate	ZIP code
	()_		(_) s fax number – optional			
	Attorney's pho	ne number	Attorney'.	s fax number – optional	Attorney	's email	l address – optiona
Serv	ice Instructio	ons for Fi	ling in Pap	er			
	A or B only if yo						
А. Г	I will accept s	service of do	ocuments at t	he attorney's addre	ess listed ab	ove: c	r
В. Г	•			is case at the maili			
D	j i wiii accept s	service or ac	Carrierits iii ti	iis case at the maiii	ng address	DCIOVV.	
Certi	fication of S	ervice by	Mailing or	Delivery for Fili	ng in Pap	er	
				f Applicant is exempt j			
		-		ally be served on regis	_		
			^	artify that an			20
I,	t 1101111 10 0100 0		, c	Month	<u>'a</u>	Dan	,
	•			ertify that on		-	
	•			Month pplicant or Applica		-	
l mail	ed or gave a c	opy of this	Answer to A			-	
l mail	•	opy of this	Answer to A			-	
l mail	ed or gave a c	copy of this	Answer to A	oplicant or Applica		y at th	
Name of Party's	of person to whom	copy of this m I delivered ailing address	Answer to A		nt's attorne	y at th	nis address:
I mail \overline{Name} \overline{Party}' Oath	ed or gave a configuration of person to whomas or attorney's made and Signatu	copy of this I delivered ailing address	or mailed it	pplicant or Applica	nt's attorne	y at th	nis address: ZIP code
Name of Party's Oath I,	ed or gave a conference of person to whomas or attorney's mand Signatu	copy of this I delivered ailing address	or mailed it	oplicant or Applica	nt's attorne	y at th	nis address: ZIP code
Name of Party': Oath I, Print	of person to whom s or attorney's me and Signatu t your name	copy of this m I delivered ailing address	Answer to A	City ave read this Answ	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
Name of Party's Oath I,	of person to whom s or attorney's ma and Signatu t your name jury and pursu	copy of this I delivered ailing address Ire	Answer to A	pplicant or Applica	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
I mail \overline{Name}	of person to whom s or attorney's me and Signatu t your name	copy of this I delivered ailing address Ire	Answer to A	City ave read this Answ	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
Name (Party': Oath I,	of person to whom s or attorney's ma and Signatu t your name jury and pursus s Answer is tru	m I delivered ailing address ure uant to the leand corre	Answer to A or mailed it , h aws of the S ect.	oplicant or Applica City ave read this Answ tate of lowa that the	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
Name of per in this	of person to whom s or attorney's ma and Signatu t your name jury and pursu	copy of this I delivered ailing address Ire	Answer to A or mailed it , h aws of the S ect.	City ave read this Answ	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
Name of Party's Oath I,	of person to whom s or attorney's ma and Signatu t your name jury and pursus s Answer is tru	m I delivered ailing address ure uant to the leand corre	Answer to A or mailed it , h aws of the S ect. 20 Year	oplicant or Applica City ave read this Answ tate of lowa that the	nt's attorne $\frac{1}{Sto}$	ate ertify	nis address: ZIP code under penalty
Name of Party's Oath I,	ed or gave a conference of person to whomas or attorney's made and Signature tyour name for gury and pursue and sanswer is truction:	m I delivered ailing address ure uant to the leand corre	Answer to A or mailed it , h aws of the S ect. 20 Year	ave read this Answatate of lowa that the	wer, and I cone informati	ate ertify	ave provided
Name of Party's Oath I,	ed or gave a conference of person to whomas or attorney's made and Signature tyour name for gury and pursue and sanswer is truction:	ailing address ure uant to the leand corre	Answer to A or mailed it , h aws of the S ect. 20 Year	ave read this Answartate of lowa that the Vour signature*	wer, and I cone informati	ertify on I ha	ziP code under penalty ave provided
Name of Party's Oath I,	ed or gave a conference of person to whomat is or attorney's mand signature tyour name igning and pursue is Answer is true on: Month is address	ailing address ure and corre Day Em	Answer to A or mailed it , h laws of the S ect. 20 Year ail address er, you must hand	ave read this Answatate of lowa that the Vour signature* City Aadwrite your signature on	nt's attorne Sta	ertify on I had	zIP code under penalty ave provided zIP code

Important Notice

- See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you must also serve the Answer on CSRU.
- See the Guide to Representing Yourself in a Child Support Modification Case in Iowa for information on serving papers.

Instructions for Rule 17.300—Form 315: Answer to Application to Modify Child Support

Do not file these instructions

Instructions for Filing an Answer to an Application to Modify Child Support

The Iowa Judicial Branch is converting the court system to electronic filing county by county. The electronic filing system is also known as EDMS. To determine if this case is in a county using electronic filing, check the map available on the Iowa Judicial Branch website under eFiling, or call the clerk of court office in your county. If your county accepts electronic filing, you must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

☐ Filing your Answer electronically

- If the Application was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
 when you electronically file.)
- Log in to EDMS on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to EDMS</u>; or from the judicial branch website menu, you may select "eFiling > eFile (EDMS) Login."
- For help, see <u>How to eFile to an Existing Case</u>.
- You will receive a Notice of Electronic Filing (NEF) when the clerk of court has approved the eFiling of
 your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, EDMS will send you a Retraction Notice. You can then log in to My
 Filings, correct the error, and resubmit your Answer. For help, see <u>How to Resubmit a Returned Filing</u>.
- The NEF will indicate if your Applicant is exempt from electronic filing requirements, in which case, you
 must mail or serve in paper a copy of the document on Applicant if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
 must also provide each form you file to the CSRU office that serves the county where your child
 support case is filed.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, or mail a copy to Applicant spouse
 at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the attorney's address on the Application if box 5A on the Application is checked.

Do not file these instructions

February 2014

Rule 17.300—Form 316: General Answer to Application to Modify Child Support

The party served with an Application to Modify Child Support must file an Answer within **20 days** after receiving the Application and Original Notice, or the **court may enter a judgment against that party** giving Applicant what he or she asked for in the Application.

If the Application you received is on form 301, use form 315 for your Answer.

Read the Guide to Representing Yourself in a Child Support Modification Case in Iowa on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311).
- If filing in paper, you may use form 311 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

ın tn	e Iowa District Court for	County where Application is filed
Upoi	n the Petition of	Equity case no.
	ioner ne of Petitioner as it is in the Application	General Answer to Application to Modify Child Support
and c	oncerning	
	oondent ne of Respondent as it is in the Application	
1. A	nswer	
	. I admit that the following paragraphs	pplication that you think are true. If you decide later that the
A	. I admit that the following paragraphs List the numbers of the paragraphs in the A	pplication that you think are true. If you decide later that the y be too late to change your answer. s in the Application are true:

	D. I deny anything in the Application that is no	ot admitted in this	Answer.	
	E. Other information:			
2.	Request If you do not know what you want, talk to	an attorney.		
	l ask the court to: Write here what you would like the amount of child support you pay or receive to stay the			
3.	Attorney Help Check one A. An attorney did not help me prepare or	fill in this paper.		
	B. An attorney helped me prepare or fill in			
	If you check B, you must fill in the following in			
	Name of attorney or organization, if any	Attorney's P.I.N.	# – Ask the attori	ıey
	Business address of attorney or organization	City	State	ZIP code
	()() Attorney's phone number Attorney's fa			
	Attorney's phone number Attorney's fa	x number – optional	Attorney's ema	il address – optional
4.	Service Instructions If the party answering the Application is filing in A. will accept service of documents at the			o. or
	_ ,	-		
	B. will accept service of documents in this	case at the mailir	iy address bei	JVV.

Continued on next page

	l,		, certify that on		, 20
	Print your name		Month	Day	Year
	I mailed or gave a copy	y of this Answer to	Applicant or Applicant's	attorney at t	his address:
	Name of person to whom I	delivered or mailed it			
	Party's or attorney's mailir	ng address	City	State	ZIP code
	Oath and Signature				
	Ι,		, have read this Answer, a	and I certify	under penal
	I, Print your name	t to the laws of the	, have read this Answer, a		
	I, Print your name of perjury and pursuan in this Answer is true a	t to the laws of the			
•	I, Print your name of perjury and pursuan in this Answer is true a	t to the laws of the and correct.	State of lowa that the inf		

Important Notice

- See next page for instructions for filing an Answer.
- You must serve this Answer on the other parties.
- If the Child Support Recovery Unit (CSRU) is involved in this case, you
 must also serve the Answer on CSRU.
- See the Guide to Representing Yourself in a Child Support Modification Case in Iowa for information on serving papers.

Rule 17.300—Form 316: General Answer to Application to Modify Child Support

Do not file these instructions

Instructions for Filing an Answer to an Application to Modify Child Support

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■ Filing your Answer electronically

- If the Application was filed in a county that uses electronic filing, you must register to electronically
 file. For help with registration, see the eFiler's User Guide <u>How to Register Pro Se (Self Represented)</u>
 for eFiling on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you
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- For help, see <u>How to eFile to an Existing Case</u>.
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Filing your Answer in paper

- Make two photocopies of the original.
- If the Child Support Recovery Unit (CSRU) is involved in your child support modification case, you
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- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Application was filed. The county is listed at the top of the Application (form 301).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on Applicant.
- You can hand one of the copies of the Answer form to Applicant, **or** mail a copy to Applicant spouse at the address shown on the Application.
- If Applicant has an attorney, you should serve the Answer by mailing a copy to the attorney at the
 attorney's address.

Do not file these instructions

February 2014

Instructions for Rule 17.300—Form 316

Page 1 of 1

[Court Order June 17, 2008; March 6, 2014]

Forms 317 to 321: Reserved

Rule 17.300—Form 322: Motion in a Child Support Modification

Use this form if you want to ask the court to do something after your court case has already started. If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for _____ County County where the Application is filed Upon the Petition of Equity case no. ___ **Motion in a Child Support** Petitioner Modification Full name of Petitioner as it is in the Application and concerning Respondent Full name of Respondent as it is in the Application l am Check each that applies A. Detitioner B. Respondent C. Applicant 1. Request A. I ask the court to Check all that apply. If you check any box in A, you must tell the court why you are making this request in B. (1) Change the hearing date that has been set for Month (2) Set a hearing date for modification of child support. (3) Other request Explain ____ B. I am making the request(s) in this Motion because:

Rule 17.300—Form 322: Motion in a Child Support Modification, continued

2.	Attorney Help Check one					
	A. An attorney did not	heln me nrenar	or fill in t	his naner		
	B. An attorney helped If you check B, you must	me prepare or f	fill in this pa	aper.		
	Name of attorney or org	anization, if any	Attorr	ney 's P.I.N. #	$\frac{1}{2}$ – Ask the attorn	ney
	Business address of atto	rney or organizati	ion City		State	ZIP code
	()_ Attorney's phone numbe	Attorney	's fax numbe	r – optional	Attorney's ema	il address – optiona
3.	Certification of Service Section 3 to be completed only if filing.	filing in paper or	if the Applica	nt or the oth		t from electronic
	This document, if filed electronic .	-	-	_	-	
	l, Print your name	, ,	certify that	on	Day	, 20
4	Name of person to whom I delive Party's or attorney's mailing add Oath and Signature		City		State	ZIP code
4.	•				5	
	I,	, '	certify unde	r penaity of	r perjury and p	ursuant to the
	laws of the State of lowa tha this Motion is true and correct	ot.			nformation I ha	ave provided in
	Signed on: Month Day	, Zo	Your signatu	re*		
	Mailing address		City		State	ZIP code
	() Phone number	Email address		Addi	tional email addr	ess – if available
	* Whether filing electronically or in scan the form after signing it and			ignature on thi	is form. If you are	filing electronically,

Rule 17.300—Form 323: Response to a Motion in a Child Support Modification

Use this form if your spouse has filed a Motion (most likely form 322) and you disagree with what your spouse is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for County where the Application is filed					
Upon the Petition of	Equity case no				
Petitioner Full name of Petitioner as it is in the Application	Response to a Motion in a Child Support Modification				
and concerning					
Respondent Full name of Respondent as it is in the Application	_				
l am					
Check each that applies					
A. Petitioner					
B. Respondent					
C. Applicant					
1. Motion					
The other party filed a Motion on	, 20 Day Year				
2. Response Check A or B.	Day Tear				
A. 🔲 I agree with the Motion.					
B.	he Motion because: Explain				
Continu	ed on next page				

Rule 17.300—Form 323: Response to a Motion in a Child Support Modification, continued

	An attorney An attorney If you check B	helped me	prepare o		aper.								
	An attorney If you check B Name of attorn	helped me	prepare o	r fill in this paper.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
		ney or organi	zation, if any			An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:							
	Business addr			Attorney's P.I.	N. # - Ask	the attorney	y						
		ess of attorne	y or organiz	ation City		State	ZIP code						
	() _ Attorney's pho	one number	(ey's fax number – opti	onal Atto	rney's ema	til address – option						
ection iling.	4 to be complet	ted only if filir	ng in paper o	or if Applicant or the o			om electronic						
				-	_		20						
Print	vour name			, certify that on $\underline{}$	onth		, 20						
arty's	or attorney's m	ailing addres	:S	City		State	ZIP code						
Dath a	and Signat	ure											
,				, certify under per	alty of perj	ury and p	oursuant to the						
n this I	Response is t	true and cor	rect.	·	that the in	formation	I have provide						
igned o	n: Month	Day	Year	Your signature*									
1ailing	address			City		State	ZIP code						
hone n) umber	Em	nail address		Additional	email addi	ress – if available						
	υ υ				e on this form	. If you are	filing electronically						
	Printy mailed ther p Tame of arty's of a this figned of this filter p Tame of the the this filter p Tame of the this filter p	ection 4 to be completeding. This document, if filed Print your name mailed or gave a control of the party's attorned arty's or attorney's management of the State of the Stat	ection 4 to be completed only if filtifications. This document, if filed electronically are mailed or gave a copy of this other party's attorney at the action of person to whom I delivered arty's or attorney's mailing address. Dath and Signature aws of the State of lowa that I I in this Response is true and continued in the party's mailing address. Thone number Entrone when I in the party is a party in party i	dection 4 to be completed only if filing in paper of ling. This document, if filed electronically, will automorphis document, if filed electronically or in paper, you must if the filing electronically or in paper.	This document, if filed electronically, will automatically be served on a print your name and a copy of this Response to Applicant or the other party's attorney at the address below: Tame of person to whom I delivered or mailed it Tarty's or attorney's mailing address City Dath and Signature This Response is true and correct. This Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify under pendant in this Response is true and correct. The party is a certify that on and in the party is a certify that on a certification and the certi	ection 4 to be completed only if filing in paper or if Applicant or the other party is ling. This document, if filed electronically, will automatically be served on registered party is ling. Print your name mailed or gave a copy of this Response to Applicant or the other party at the party's attorney at the address below: Tame of person to whom I delivered or mailed it Party's or attorney's mailing address City Dath and Signature	ection 4 to be completed only if filing in paper or if Applicant or the other party is exempt friling. This document, if filed electronically, will automatically be served on registered parties. The print your name registered parties. The print your name registered parties. The print your name registered parties. The print your name registered parties. The print your name registered parties. The party of party of party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party, or Applicant or the other party or						

Caution: This form may require you to provide protected or sensitive information. Each party must complete one of these forms. If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so. If filing in paper, you may use form 311 to provide any protected information in full if you have not already done so. If you do not understand how to use this form, or if you should use this form, talk to an attorney. In the Iowa District Court for _ County County where the Application is filed **Upon the Petition of** Equity case no. _ Child Support **Petitioner Modification Financial** Full name of Petitioner as it is in the Application Statement and concerning Respondent Full name of Respondent as it is in the Application I am Check each that applies A.

Petitioner B. Respondent C. Applicant , state that this is a true and complete statement of my assets, debts, and present income as of the $\underline{\qquad}_{Day}$ day of 1. My Income *How often is income paid? $W = Weekly \quad B = Bi$ -weekly (every other week) $M = Monthly \quad T = Two times a month$

A. Current income from employment	Gross II	ncome	Net In	Net Income	
and other sources Sources of income, not required to list name of employer	How often?* W,B,M,T	Gross amount Before taxes	How often?* W,B,M,T	Net Amount After taxes	
(1) Wages from employer					
Job:		\$		\$	
Title:					
(2) Wages from employer					
Job:		\$		\$	
Title:					
(3) Other income		¢		\$	
Describe source:		\$		Ψ	

(4) Other income Describe source:		\$	\$
(5) Other income Describe source:		\$	\$
Total gross and net income from employment and other sources		\$ Gross income total	\$ Net income total
B. Deductions allowed for child			
support calculations			
Tax status	Yes	No	
I am currently married to the other parent <i>Check Yes or No</i>			
I have custody of the children in this case <i>Check Yes or No</i>			
(1) Number of exemptions			
Yourself Guidelines allow one exemption for parent	1		
Children			
(2) Income tax withheld Federal			\$
State			\$
(3) FICA Social Security & Medicare			\$
(4) Mandatory pension contribution			\$
(5) Mandatory occupational license fees			\$
(6) Union dues			\$
(7) Prior court-ordered child support Paid to:			\$
Paid to:			\$
Paid to:			\$
(8) Prior court-ordered medical support Paid to:			\$
Paid to:			\$
Paid to:			\$

	(9	(a	ior co limor <i>iid to:</i>	• /	ort				\$	
	(1	0) <i>A</i>	ctua mplo	l child care expenses due yment <i>custodial parent onl</i> y	to ,				\$	
	Total deductions							\$		
		C	heck	this box if you have attached	a sheet with	additional info	rmation on your in	come and de	ductions.	
2.	So	cia	l Se	curity Disability (SSD):					
	A.	SS	D b	enefits paid to you						
		(1)	Am	ount paid for your expe	nses		\$		per	month
		(2)	Ber	nefit paid for each child	in your ho	me	\$		per	month
			a.	Number of children rec	eiving ber	nefits	c	hildren		
			b.	List the children in you	r home wh	no receive SS	SD benefits Use	e initials on	uly	
				First, middle, & last initials of each child	Birth ye	ar	First, middle, 8 initials of each		Birth year	
				i.			iv.			
				ii.			v.			
				iii.			vi.			
				Check this box if you and receive Social S	ecurity Dis	ability (SSD).		hildren who	o live in you	r home
	B.	Be	nefit	ts paid to other perso	n childrer	n are living v	vith			
		(1)	Ber	nefit paid for each child	in other pe	erson's home	\$		per	month
		(2)	Nur	mber of children receiving	ng benefits	8	c	hildren		
		(3)		the children who receivinitials only:	ve SSD be	enefits but live	e with someone	other than	າ you.	
				First, middle, & last initials of each child	Birth ye	ar	First, middle, 8 initials of each		Birth year	
				i.			iv.			
				ii.			v.			
				iii.			vi.			
				Check this box if you home and receive So				hildren who	o do not live	in your

3. Qualified additional dependent deduction

- List the initials and birth year of each child you are the legal parent of.
- Do not include any children covered by the child support order involved in this case.

First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth year
(1)		(4)	
(2)		(5)	
(3)		(6)	

Check this box if you have attached a sheet listing additional children for the qualified additional dependent deduction.

4.	Extraordinar	y visitation	For noncustodial	parent only

	er of court-ordered overnights in a year umber exceeds 127 days per year, provide a copy of the court order containing the visitation ons.
(2) Physic	cal care
а. 🗌	The court ordered equally shared physical care for the children. If the court ordered equally shared physical care for the children, the extraordinary visitation credit does not apply.
b. 🗌	The court did not order equally shared physical care for the children.

Continued on next page

5. Assets Things you own.

A. Real estate

Property Address	Purchase Price	Debt Total amount you still owe on it	
(1)	\$	↔	
(2)	\$	\$	

Γ	7 (Check this box i	f vou have	attached a	a sheet with	additional	information	on other real	estate
---	-----	------------------	------------	------------	--------------	------------	-------------	---------------	--------

B. Vehicles

Includes cars, trucks, motorcycles, and other motorized vehicles.

Make Make (e.g. Ford)	Year	Market value What it would sell for
(1)		*
(2)		\$
(3)		\$

ı	- 1	Check i	this b	ox it	vou i	have	attach	ed a	sheet	with	addition	ıl in	formation	on of	her ve	hicles	₹.
L	_	CITO CIO	11000	000 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10110	or ce ce ce e	000	511000	,, reit	Ce Ceccette C / Ic		70111100000	0/1 01	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	٠.

\mathbf{c}	Securities.	stacks	ጲ	honds
◡.	oecuniles.	SIUCKS.	œ	DUITUS

Current value of:					
(1) Stocks	\$				
(2) Bonds	\$				

D. Life insurance *Owner: P = Petitioner R = Respondent J = Joint (Both)

Life insurance Company name	Owner*	Cash value Not death benefit	Loan from cash value Total amount still owed on loan	Cash value Minus loan owed
(1)		\$	\$	\$
(2)		\$	\$	\$
(3)		\$	\$	\$

Check this box if you have attached a sheet with additional information on life insurance.

E. Bank accounts

Checking and savings accounts Bank or Credit Union name If you do not use bank accounts, write "Cash"	Account type Checking or Savings	Net value Cash value minus loan / overdraft owed
(1)		\$
(2)		\$
(3)		\$

Check this box if you have attached a sheet with additional information on other checking and savings accounts.

F. Other assets

Items not listed in the other boxes should be listed here. For example: jewelry, furs, guns, sporting goods, farm animals.

*Owner: P = Petitioner R = Respondent J = Joint (Both)

Other assets Describe	Owner* P,R,J	Market value What it would sell for	Debt Total amount you still owe on it and to whom owed	Net value Market value minus debt owed
(1)		\$	\$	\$
			to:	
(2)		\$	\$	\$
(2)		Ψ	to:	Ψ
(2)		\$	\$	\$
(3)		Φ	to:	Φ

Check this box if you have attached a sheet with additional information on other assets.

6. Expenses

A. My expenses

List your living expenses

*How often paid?: $W = Weekly \ B = Bi$ -weekly (every other week) M = Monthly T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$

(5) Medical, dental Not health insurance payments— see (10).	\$
(6) Utilities (gas, electric)	\$
(7) Phone	\$
(8) Cable / satellite television / internet	\$
(9) Car insurance payment	\$
(10) Health insurance payment	\$
(11) Credit card payments	\$
(12) Car loan payments	\$
(13) Other loan payments	\$
(14) Other expense Identify:	\$
(15) Other expense Identify:	\$
(16) Other expense Identify:	\$
(17) Totals from attached sheets, if any	
Check this box if you have attached a sheet with additional information on your expenses.	\$
Total expenses	\$

7. My debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*How often paid?: W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month A = Annually

Payable to	Item or service	Amount	How often paid?* W,B,M,T,A	Balance Due
A.				\$
В.				\$
C.				\$
D.				\$
E. Totals from attached sheets, if any				\$

Check this box if you have attached a sheet with additional information on other debts, and enter the total.		
Total other debts Including amounts shown on attached		\$
sheet, if any.		

8. Current spouse's income

- List your current spouse's information.
- This information will not be used to determine child support obligations.

*How often is income received?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

A. Current income from employment	Gross Ir	ncome	Net Income	
and other sources Sources of income, not required to list name of employer	How often?* W,B,M,T	Gross amount Before taxes	How often?* W,B,M,T	Net Amount After taxes
(1) Wages from employer Job: Title:		\$		\$
(2) Wages from employer Job: Title:		\$		\$
(3) Other income Describe source:		\$		\$
(4) Other income Describe source:		\$		\$
Total gross and net income from employment and other sources		\$ Gross income total		\$ Net income total

9. Attorney Help

Che	еск о	one							
A.		An attorney did not help me prepare or fill in this paper.							
B.		An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:							
		Name of attorney or organization, if any	Attorney's P.I.N. #	– Ask the attorn	геу				
		Business address of attorney or organization	ı City	State	ZIP code				
		() fax number – optional	Attorney's ema	il address – optiona				

10. Certification of Service by Mailing or Delivery

Section 10 to be completed only if filing in paper or if Applicant the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. l, Print your name I mailed or gave a copy of this Child Support Modification Financial Statement to Applicant or the other party or Applicant's or the other party's attorney at the address below: Name of person to whom I delivered or mailed it Party's or attorney's mailing address City ZIP code State 11. Oath and Signature

, certify under penalty of perjury and pursuant to the

laws of the State of Iowa that I have read this Child Support Modification Financial Statement and that the information I have provided in this Statement is true and correct.

Signed on: Month	Day	_, 20 <u></u> Year	Your signature*		
Mailing address			City	State	ZIP code
() Phone number		Email address		Additional email add	lress – if available

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.300—Form 325: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In th	e lov	va District Court for	nty where the Application is filed			
Upo	n the	Petition of	Equity case no			
	tione me of Pe	r titioner as it is in the original case	Affidavit of	Mailing	Notice	
and o	conce	rning				
	pond me of Re	ent spondent as it is on the Application				
	heck o	An attorney did not help me prepare An attorney helped me prepare or fill If you check B, you must fill in the following Name of attorney or organization, if any Business address of attorney or organization (in this paper. information: Attorney's P.I.N. # - A City	State	ney ZIP code ail address – optional	

Important Notice

A party **must** file this Affidavit with the clerk of court if he or she asks the court for a default Decree for modification of child support. The party **must** also complete the oath and signature section on the next page.

Oath and Signature on next page

Rule 17.300—Form 325: Affidavit of Mailing Notice, continued

Oath and Signature			
I,	, certify under penalty of p	erjury and p	oursuant to the
Print your name	. , , ,		
laws of the State of lowa that on the $\frac{1}{Da}$	day of, 2	0, I se	ent by ordinary
mail with proper postage, the following	paper or papers:		
Check one			
Notice of Intent to File a Written App support, or	olication for Default Decree fo	r modificatio	n of child
Other document (describe):			
to the other party's last-known address	below.		
Other party's street address	City	State	ZIP code
Signed on: Month Day Year	Applicant's signature*		
·			
Mailing address	- City	State	ZIP code
Phone number Email address	a Addition	nal mail add	ress – if available
rnone number Email adares:	S Auditio	пан етан ааа	ress – ij avanabie

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.300—Form 326: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Co				County
	(County where your case is filed		
Upon the Petition of		Equity case no		
Petitioner Full name of Petitioner as it is in the	original case	Notice of Intent to Application for D		
and concerning				
Respondent Full name of Respondent as it is in the	ne Application			
To party receiving thi	s Notice:			
First name	Middle name	Last name		
Date of Notice:		20		
Month	,,	20 Year		
Handwritten signature of part or attorney if filing in paper The person who provided the		r Electronic signature of poor attorney if filing electrons the information below.		his Notice
Present street address (If	attorney, firm address)	City	. State	ZIP code
()				
Phone number	Email add	dress		
Instructions for party filing. Filing your Notice	-			
0 .	•	ing this Notice unless that party i	s exempt fi	rom electronic
Filing your Notice	in paper (if you have rec	eived permission from the court	to file in pa	aper)
Complete form 32	25 and file the original at the f this form (326) at the cler	ving this Notice by mail or in per the clerk of court's office. rk of court's office.	rson.	
February 2014	Rule 17	.300—Form 326		Page 1 of 1

Rule 17.300—Form 327: Request for Relief in a Child Support Modification

Use this form only if	vou have filed or	answered an Application	to Modify Chi	ld Support (301) and:
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- The other party did not file an Answer (315), or
- The other party will not work with you to prepare a Settlement Agreement (328).

Caution: This form may require you to provide protected or sensitive information.

- [4] If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- [a] If filing in paper, you may use form 311 to provide any protected information in full if you have not already done so.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

n the Iowa District Court	forCounty where A	oplication is filed	County
Upon the Petition of	Equity o	ase no	
Petitioner Full name of Petitioner as it is in the Applia		juest for Relief in Support Modifica	
Respondent Full name of Respondent as it is in the App	plication		
	Fill in all information that you know ou may leave your street address, ph		
A. I am Check each that applies (1) Petitioner (2) Respondent (3) Applicant B. Your information:	Birth year		
A. I am Check each that applies (1) Petitioner (2) Respondent (3) Applicant	Birth year	State	ZIP code
A. I am Check each that applies (1) Petitioner (2) Respondent (3) Applicant B. Your information:	Birth year		
A. I am Check each that applies (1) □ Petitioner (2) □ Respondent (3) □ Applicant B. Your information: Your present street address	Birth year City Phone number	State	

 $Rule\ 17.300 — Form\ 327: \textit{Request for Relief in a Child Support Modification}, continued$

D	. Other p	erson (non-parent) who re	eceives child suppo	Birth year	•	
	Full n	name: first, middle, last				
	\overline{Prese}	nt street address	City		State	ZIP code
	Coun	ty	() . Phone numbe	r	Email a	ddress
2. R	equest	for Relief				
Α	. Child s	support				
		ach that is true, and fill in th	e blanks for the item	ıs you check		
	(1)	Child support should be ra	ised from \$	per mo	onth to \$_	
		per month, beginning		, 20	for	·
		Mon			ear	
		First, middle, & last initials of each child	Birth year	First, middle, 8 initials of each		Birth year
		a.		d.		
		b.		e.		
		c.		f.		
		Check this box if you he	ave attached a separ	rate sheet listing add	itional ch	ildren.
	(2)	Child support should be lo	wered from \$	per mo	onth to \$_	
		per month beginning			for	
		Mon	nth	Day 1	^r ear	
		First, middle, & last initials of each child	Birth year	First, middle, & initials of each		Birth year
		a.		d.		
		b.		e.		
		c.		f.		
		Check this box if you ha	ave attached a separ	rate sheet listing add	itional ch	ildren.
	(3)	Check here if you want chi amount. If you check this, w				Support Guideline
		a. Amount requested: \$	per mo	onth		

		b. Child	l support should k	oe different than t	he Guidelines amount becau	use:
(4)) Ш	·	port should be sto			
		Day	day of <i>Month</i>	, 20 Yea	for: <i>r</i>	
			iddle, & last of each child	Birth year	First, middle, & last initials of each child	Birth year
		a.			d.	
		b.			e.	
		C.			f.	
		ou check (2				
	a. b.	☐ A coi	ld stay the same. urt order currently	says who gets the	ne tax deduction for the child	
		☐ A coi	ld stay the same. urt order currently	says who gets the		
		☐ A coi	ld stay the same. urt order currently	says who gets the	ne tax deduction for the child	
		A coi shou	ld stay the same. urt order currently	says who gets the	ne tax deduction for the child	d or children aı
		A coi shou	ld stay the same. urt order currently ld be changed as t, middle, & last	y says who gets the set forth in the ta	ne tax deduction for the child able below. Explain Person who should now	d or children aı
		A con shou	ld stay the same. urt order currently ld be changed as t, middle, & last	y says who gets the set forth in the ta	ne tax deduction for the child able below. Explain Person who should now	d or children aı
		A conshou	ld stay the same. urt order currently ld be changed as t, middle, & last	y says who gets the set forth in the ta	ne tax deduction for the child able below. Explain Person who should now	d or children al
		A con shou	ld stay the same. urt order currently ld be changed as t, middle, & last	y says who gets the set forth in the ta	ne tax deduction for the child able below. Explain Person who should now	d or children ar

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued

C.	Health Check (ce or cash medical su	ıpport			
	(1) ☐ There is no court order at this time on who pays health insurance or cash medical support.							
	(2) 🗆		ere i ppor		time on who pays	s health insurance or cash medical		
	Ify	ou c	heck ((2), <i>check</i> a <i>or</i> b				
		a.		A court order currently schildren and it should s		nealth care expenses for the child or		
		b.		A court order currently to be changed as set forth		nealth care expenses and it should Explain		
					<u> </u>	Parent who should now provide		
				First, middle, & last initials of each child	Birth year	health insurance or cash medical support		
				i.				
				ii.				
				iii.				
				iv.				
				v.				
				☐ Check this box if you	are attaching a sepa	rate sheet listing additional children.		
	(3) Isl	noul	d pay	/ %	of the out-of-pocket	t health care expenses.		
		e ot oens		arent should pay %	c	of the out-of-pocket health care		
	(5) Isl	noul	d pay	/ %i	in cash medical sup	pport.		
	(6) Th	e ot	her p	arent should pay %	i	n cash medical support.		
D.	Court Check of		s					
	(1)	All	cour	t fees should be paid by	me.			
	(2)	All	cour	t fees should be paid by	the other parent.			
	(3)	Th	e oth	er parent and I should p	ay one-half of the r	remaining court fees.		
	(4)	Th	e oth	er parent and I should p	ay one-half of the t	otal court fees.		

Rule 17.300—Form 327: Request for Relief in a Child Support Modification, continued

		ttorne heck o	ey's Fees			
	(1)) My	attorney's fees			
	,	, a.	☐ I have no attorney's fe	es.		
		b.	☐ I will pay my own attor	rney's fees.		
		C.	☐ I ask that the other pa	rty pay \$		_ for my attorney's fees.
3.	Nece	essai	ry Documents			
			·	_		ch other any papers that may
	be ne	eaea	to carry out the terms o	the Decree	Modifying Child	і Ѕирроп.
4.	Othe	r Re	quest for Relief Attack	n additional she	ets if necessary	
_	04-4-		-4611-d4di			
ວ.			nts of Understanding that applies	and Fact		
	a. \Box		ave made a full disclosure o	of my income t	o the court	
				•		
	b] This	s Request for Relief addres	sses all issues	in the Applicatio	n to Modify Child Support.
	c. 🗌	_	ant the court to approve thi difying Child Support.	s Request for	Relief and make	it part of the final Decree

Continued on next page

 $Rule\ 17.300 — Form\ 327: \textit{Request for Relief in a Child Support Modification}, continued$

6.	Attorney Help				
	Check one	lm waa muamawa	ar fill in this name	_	
	(1) An attorney did not he			l .	
	(2) An attorney helped me If you check (2), you must fill in				
	-y, y - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -)			
	Name of attorney or organ	ization, if any	Attorney's P.I.N	H. # $-$ Ask the attor	ney
	Business address of attorn	ey or organizatio	n City	State	ZIP code
	()	()		
	()_ Attorney's phone number	Attorney's	fax number – optional	Attorney's emo	ail address – optiona
	filing. This document, if filed electronicall				20
	l,	, C	ertify that on		, 20 v Year
	Name of person to whom I delivered	d or mailed it			
	Party's or attorney's mailing addre	ss (City	State	ZIP code
8.	Oath and Signature				
	l,	, h	ave read this Req	uest, and I certi	fy under penalty
	Print your name				
	of perjury and pursuant to the in this Request is true and co		tate of lowa that tr	ie information i	nave provided
		, 20	_		
	Signed on: Month Day	Year Y	our signature*		
	Mailing address	(Lity	State	ZIP code
	()	mail address		11:4:11	
				lditional email add	
	* Whether filing electronically or in pa scan the form after signing it and the			this form. If you are	g filing electronically,

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support

Use this form only if:

- You and the other party both agree to the terms of a Settlement Agreement.
- There is a current Iowa child support order in effect.
- You would like to increase, decrease, or stop child support
- · There is on file an Application to Modify Child Support.

Caution: This form may require you to provide protected or sensitive information.

- $oxed{oxed}$ If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (311) if you have not already done so.
- If filing in paper, you may use form 311 to provide any protected information in full.

the	lowa District Court for	County where Applicati	on was filed	Count
Jpo	n the Petition of	Equity case r	no	
ull na	tioner ne of Petitioner as it is in the Application concerning		ent Agreeme ition to Modi Support	
Resp	oondent			
ull na	ne of Respondent as it is in the Application			
Ar Spo	oplicant's Information Fill in all buse and you fear for your safety, you may	information that you know. Ij v leave your street address, p	f you have been as hone number, and	saulted by your email blank.
Ar Spo	oplicant's Information Fill in all nuse and you fear for your safety, you may Applicant's information:	information that you know. Ij v leave your street address, p.	f you have been as hone number, and	saulted by your email blank.
Ar Spo	oplicant's Information Fill in all nuse and you fear for your safety, you may Applicant's information:	v leave your street address, p	f you have been as hone number, and State	saulted by your email blank.
Ar Spo	oplicant's Information Fill in all nuse and you fear for your safety, you may Applicant's information:	v leave your street address, p. rth year	hone number, and	email blank. ZIP code
Ar spc A.	Applicant's present street address	v leave your street address, p. rth year	hone number, and State	email blank. ZIP code
Ap Spo A.	Applicant's present street address County	th year City Phone number	hone number, and State	l email blank. ZIP code

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support, continued

Full n	ame: first, middle, last				
Presen	nt street address	City	S	'tate	ZIP code
Count	y	() Phone numbe	er E	Email ad	ddress
Agreeme	nt				
A. Child s Check e	upport ach that is true, and fill in th	e blanks for the iten	ns you check.		
(1)	Child support should be ra	aised from \$	per mont	h to \$_	
	per month beginning	nth		for	:
	First, middle, & last initials of each child	Birth year	First, middle, & la initials of each c		Birth year
	a.		d.		
	b.		e.		
	c.		f.		
	Check this box if you h	ave attached a sepa	rate sheet listing addition	onal chi	ildren.
(2)	Child support should be Id	wered from \$	per mont	h to \$_	
	per month beginning	nth	Day , $20{Yea}$:
	First, middle, & last initials of each child	Birth year	First, middle, & la initials of each c		Birth year
	a.		d.		
	b.		e.		
	C.		f.		
	Check this box if you h	ave attached a sepa	rate sheet listing additio	onal chi	ildren.
(3)	c. Check this box if you h Check here if you want ch amount. If you check this, y	ild support to be hi	f. rate sheet listing addition gher or lower than the want and explain why in	Child S	

	Day day of Month	, 20 	for:	
	First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birth ye
	a.		d.	
	b.		е.	
	c.		f.	
	Check this box if you ha	ave attached a separ	rate sheet listing additional chi	ldren.
$(2) \Box$ $If y$	There is a court order at to ou check (2), check a or b:	this time on tax d		
` ' —	There is a court order at to court check (2), check a or b: A court order currently should stay the same	his time on tax de y says who gets th . y says who gets th	eductions. The tax deduction for the child The tax deduction for the child	
If yo	There is a court order at to cu check (2), check a or b: A court order currently should stay the same A court order currently	his time on tax de y says who gets th . y says who gets th	eductions. The tax deduction for the child The tax deduction for the child	d or children
If yo	There is a court order at to check (2), check a or b: A court order currently should stay the same A court order currently should be changed as	this time on tax de y says who gets the s y says who gets the s set forth in the ta	the tax deduction for the child the tax deduction for the child the tax deduction for the child the below. Explain	d or children
If yo	There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child.	this time on tax de y says who gets the s y says who gets the s set forth in the ta	the tax deduction for the child the tax deduction for the child the tax deduction for the child the below. Explain	d or children
If yo	There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child.	this time on tax de y says who gets the s y says who gets the s set forth in the ta	the tax deduction for the child the tax deduction for the child the tax deduction for the child the below. Explain	d or children
If yo	There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a first, middle, & last initials of each child i.	this time on tax de y says who gets the s y says who gets the s set forth in the ta	the tax deduction for the child the tax deduction for the child the tax deduction for the child the below. Explain	d or children
If yo	There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed a should be changed a should be changed in it.	this time on tax de y says who gets the s y says who gets the s set forth in the ta	the tax deduction for the child the tax deduction for the child the tax deduction for the child the below. Explain	d or children
If yo	There is a court order at tou check (2), check a or b: A court order currently should stay the same. A court order currently should be changed as a should be	y says who gets the says who gets the says who gets the says who gets the says forth in the target. Birth year	the tax deduction for the child the child th	d or children
a. b.	There is a court order at to check (2), check a or b: A court order currently should stay the same. A court order currently should be changed at should be changed at should be changed at initials of each child it. ii. iii. iv. v. Check this box if you insurance or cash mediated as the court order currently should be changed at should be	y says who gets the says who g	he tax deduction for the child he tax deduction for the child able below. Explain Person who should now tax deduction.	claim child fo

Rule 17.300—Form 328: Settle	ement Agreement on an Application	to Modify Child Support,	continued
а. 🗀	A court order currently s children and it should sta		nealth care expenses for the child or
b. 🗀	A court order currently s be changed as set forth		nealth care expenses and it should Explain
	First, middle, & last initials of each child	Birth year	Person who should now provide health insurance or cash medical support
	i.		
	ii.		
	iii.		
	iv.		
	v.		
	Check this box if you	are attaching a sepa	rate sheet listing additional children.
(3) Applicant	should pay %	of the	e out-of-pocket health care expenses.
(4) The other expenses.			of the out-of-pocket health care
(5) Applicant	should pay %	in cas	sh medical support.
(6) The other	parent should pay %	in cash me	edical support.
D. Court Fees Check one			
(1) 🗌 All cou	urt fees should be paid by	Applicant.	
(2) 🗌 All cou	urt fees should be paid by	the other parent.	
(3)	ther parent and Applicant s	should pay one-hal	f of the remaining court fees.
(4)	ther parent and Applicant s	should pay one-hal	If of the total court fees.

Continued on next page

Rule 17.300—Form 328: Settlement Agreement on an Application to Modify Child Support, continued

	E.	Attorney's Fees Check one
		(1) Applicant's attorney's fees
		a. Applicant has no attorney's fees.
		b. Applicant will pay Applicant's own attorney's fees.
		c. Applicant asks that the other party pay \$ for Applicant's attorney's fees.
		(2) The other party's attorney's fees
		a. The other party has no attorney's fees.
		b. The other party will pay his or her own attorney's fees.
		c. The other party asks that Applicant pay \$ for the other party's attorney's fees.
3. 4.	V\ m	ecessary Documents le ask that the court require each of us to sign and deliver to each other any papers that hay be needed to carry out the terms of the Decree Modifying Child Support. The Agreements Attach additional sheets if necessary
	_	
5.		torney Help Applicant Check one
		 (1) An attorney did not help the Applicant prepare or fill in this paper. (2) An attorney helped the Applicant prepare or fill in this paper. If you check B, you must fill in the following information:
		Name of attorney or organization, if any $Attorney$'s P.I.N. # $-Ask$ the attorney
		Business address of attorney or organization City State ZIP code
		() (
	B.	The other party Check one
		(1) An attorney did not help the other party prepare or fill in this paper.
		(2) An attorney helped the other party prepare or fill in this paper.

Page 6 of 6

Rule 17.300-Form 328: Settlement Agreement on an Application to Modify Child Support, continued If you check (2), you must fill in the following information: Name of attorney or organization, if any Attorney's P.I.N. # – Ask the attorney Business address of attorney or organization State ZIP code Attorney's email address - optional 6. Oaths and Signatures This Settlement Agreement addresses all issues in our modification of child support. We have made a full disclosure of our income to the court. We want the court to approve this Agreement and make it a part of the final Decree Modifying Child Support. Applicant's Oath and Signature ____, certify under penalty of perjury and pursuant to the Print your name laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in this child support modification. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. Applicant's signature* Month Mailing address State ZIP code Phone number Email address Additional email address - if available * Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically. B. The other party's Oath and Signature , certify under penalty of perjury and pursuant to the Print your name laws of the State of Iowa that I have read this Settlement Agreement and it accurately states how I would like the court to address the issues in this child support modification. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am asking that this Settlement Agreement be presented to a judge for approval and filing with the court. Month Other party's signature* Mailing address City ZIP code State Email address Additional email address – if available

Rule 17.300-Form 328

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing

electronically, scan the form after signing it and then file electronically.

[Court Order June 17, 2008; March 6, 2014]

Forms 329 to 400: Reserved

February 2014

Rule 17.400 Child custody and visitation forms for unmarried parents. The following forms are for determining child custody and visitation terms for unmarried parents of children under the age of 18 who are children of both parties, or children under age 18 whom the parties have adopted, or children 18 years of age or older who are children of both parties and are dependent or still need support. Parties also must use these forms if a party is pregnant with the other party's child. Parties cannot use these forms if the parties were ever married to each other.

Form 401: Petition for Custody and Visitation (Parents not Married)

Form 402: Petition Cover Sheet for Custody and Visitation

Form 403: Confidential Information Form

Form 404: Original Notice for Personal Service
Form 404a: Original Notice for Personal Service

Form 405: Acceptance of Service

Form 406: Directions for Service of Original Notice
Form 407: Motion and Affidavit to Serve by Publication

Form 408: Original Notice by Publication
Form 408a: Proof of Service by Publication

Form 409: Application and Affidavit to Defer Payment of Costs

Form 410: Affidavit of Service of Original Notice and Petition for Custody and

Visitation

Form 411: Protected Information Disclosure

Form 412: Joint Statement to Disestablish Legal Parent

Form 413: Motion to Disestablish Legal Parent

Form 414: Reserved

Form 415: Answer to Petition for Custody and Visitation

Form 416: General Answer to a Petition for Custody and Visitation

Forms 417 to 420: Reserved

Form 421: Affidavit for Temporary Custody and Visitation

Form 422: Motion in a Custody and Visitation Case

Form 423: Response to a Motion in a Custody and Visitation Case

Form 424: Custody and Visitation Financial Statement

Form 425: Affidavit of Mailing Notice

Form 426: Notice of Intent to File Written Application for Default Decree

Form 427: Request for Relief in a Custody and Visitation Case
Form 428: Settlement Agreement for Custody and Visitation

Form 429: Agreed Parenting Plan
Form 430: Proposed Parenting Plan

Forms 431 to 500: Reserved

[Court Order July 19, 2019, effective September 1, 2019]

legal advice.

Rule 17.400—Form 401: Petition for Custody and Visitation (Parents not Married)

Read the *Guide to Representing Yourself in an Iowa Custody and Visitation Case (Parents not Married)* on the Iowa Judicial Branch website before using this form.

Petitioner: Use this form only if one or more of the following are true:

- There are children under age 18 who are children of both Petitioner and Respondent.
- There are children under age 18 who were adopted by both Petitioner and Respondent.
- . A parent is pregnant with the other parent's child.
- · The parties have never been married to each other.
- If filing electronically, you must provide any protected information in full on form 411.
- If filing in paper, you may use form 411 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa	District Court for $\frac{1}{Cou}$	nty where you are filing thi	SPetition County
Upon the Petition of		For clerk's use only	
Petitioner Full name: The parent who files the Petition	first, middle, last		Custody and Visitation ents not Married)
and concerning			
Respondent Full name:	first, middle, last		
parent and you fear for	your safety, you may leave y	our street address, phone	ave been assaulted by the other e number, and email blank.
parent and you fear for	your safety, you may leave y	our street address, phone	e number, and email blank.
parent and you fear for A. Petitioner's (you	your safety, you may leave y	our street address, phone nt residence: Birth yea	e number, and email blank. r State ZIP code
parent and you fear for A. Petitioner's (you Petitioner's present	your safety, you may leave y ur) birth year and preser nt street address	our street address, phone It residence: Birth year City Email address	e number, and email blank.
parent and you fear for A. Petitioner's (you Petitioner's present	your safety, you may leave y ur) birth year and preser nt street address Phone number the other parent's) birth	our street address, phone It residence: Birth year City Email address	e number, and email blank. T State ZIP code

August 2019 Rule 17.400—Form 401 Page 1 of 6

Persons who are hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). Disability coordinators cannot provide

 $Rule\ 17.400-Form\ 401: \textit{Petition for Custody and Visitation (Parents not Married)}, continued$

	Full name: first, middle, last						
	Petitioner's present street addres	S	City	,		State ZII	ode code
	()					
	County Phone	number	E	mail addres	S		
. G	eneral Information about	the Partie	s and the	e Childre	en		
A.	Children Check all that are true						
	A. There are children und Respondent.	ler age 18 wh	no are the I	biological c	hildren of	both Petitic	ner and
	B. There are children und by the other party.	ler age 18 wh	no are the I	biological c	hildren of	one party a	and adopte
	C. There are children und	ler age 18 wh	no were ad	opted by b	oth parties	i.	
	D. Detitioner or Responde	ent is pregna	nt.				
В.	Identification of children						
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
	First, middle, & last initials					1	I
	I						
	Birth year						
C	Birth year Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, check	e if legal parei	nts have bee	n establishe	ed and how.	If establish	ned by gene
C	☐ Check this box if you have at Legal parents For each child of the parties, stat	e if legal parei	nts have bee	n establishe	ed and how.	If establish	ned by gene
C	☐ Check this box if you have at Legal parents For each child of the parties, stat	e if legal pares k the box man	nts have bee ked "Other	n establishe " and explai	d and how. n on section	If establish n 4 below.	
C	☐ Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, chec	e if legal pares k the box man	nts have bee ked "Other	n establishe " and explai	d and how. n on section	If establish n 4 below.	
c	Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, chec	e if legal paren k the box man	nts have bee ked "Other	n establishe " and explai Child (3)	d and how. n on section	If establish a 4 below.	
C	☐ Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, check Legal parents established? Yes	e if legal paren k the box man	nts have bee ked "Other	n establishe " and explai Child (3)	d and how. n on section	If establish a 4 below.	
C	Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, chec Legal parents established? Yes No	e if legal parent k the box man	nts have bee ked "Other	n establishe " and explai	d and how. n on section	If establish 14 below. Child (5)	Child (6)
C	Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, chec Legal parents established? Yes No Unknown	e if legal parent k the box man	nts have bee ked "Other	n establishe " and explai	d and how. n on section	If establish 14 below. Child (5)	Child (6)
C	Check this box if you have at Legal parents For each child of the parties, stat testing or paternity affidavit, chec Legal parents established? Yes No Unknown If established, state how:	e if legal parent k the box man	nts have bee ked "Other	n establishe " and explai	d and how. n on section	If establish 14 below. Child (5)	Child (6)

Rule 17.400-Form 401: Petition for Custody and Visitation (Parents not Married), continued

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parent(s): Fill in as much information as you know.

		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(1)	Children's initials						
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(2)	Children's initials	(1)	(=)	(2)	(1)	(2)	(1)
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	ı/dd/yyyy	To mm/	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(3)	Children's initials						
	Lived with		Adult Name		Ci	ity	State
	Dates	From mn	ı/dd/yyyy	To mm/	/dd/yyyy		
	ı	Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(4)	Children's initials	, ,	, ,	, ,			, ,
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		
	1	Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(5)	Children's initials		, ,	, ,		, ,	, ,
	Lived with		Adult Name		Ci	ity	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		

☐ Check this box if you have attached a separate sheet listing additional children or addresses.

Note: If the children have been in Iowa for less than six months, an Iowa court may not be able to issue an order about custody or visitation. The rules are complicated and you may need to talk to an attorney.

Rule 17.400—Form 401: Petition for Custody and Visitation (Parents not Married), continued

Е		•		ent's status that is true	
	(1)		If yo	spondent (the other parent) is in the military service. ou check (1) , there are special rules that may prevent your case from going for a parent is in the military. You should talk to an attorney.	ward if the
	(2)		Res	pondent is in prison or jail at	_in State
F.		otec eck c		or no contact order	
	(1)			ere is neither a "protective order" nor a "no contact order" between Petition d Respondent (the other parent).	oner (you)
	(2)			re is a "protective order" or a "no contact order" between Petitioner and ou check (2), fill in the following information:	Respondent.
			a.	County and state where the order came from:	
				County	State
			b.	Court case number:	
	Othe ieck A			s about the Children	
A.		Th	ere	are no other cases about the children. If you check A, skip to 4.	
В.		Th	ere	are other cases about the children.	
	abl	e to	issue	re is a court order from out of state about the children, an Iowa court may an order about custody or visitation. The rules are complicated and you i attorney.	
	If y	ои с	heck	B, fill in the applicable information below.	
	A.			e court	
		Che	e <i>ck</i> a	orb	
		a.		There is no juvenile court case.	
		b.		There is a juvenile court case.	
			If yo	ou check b, fill in the following information:	
			i.	County and state of the juvenile court case: County	State
			ii.	Juvenile court case number:	
				Check one	
				(a) ☐ Concurrent jurisdiction has been granted.	
				(b) ☐ Concurrent jurisdiction has not been granted.	
				If the juvenile court has not given concurrent jurisdiction (permission), the	en child
				custody cannot be decided in this case. You should talk to an attorney.	

 $Rule~17.400\\ --Form~401: \textit{Petition for Custody and Visitation (Parents not Married)}, continued$

	Ch	eck a	or b	
	a.		There is no custody order.	
	b.		There is a custody order.	
		If y	ou check b, fill in the following information:	
		i.	County and state where the custody order came from:	
			County	State
0	O h	أأ. عاملة	Court case number:	
C.			upport order v <i>or</i> b	
		_		
	a. L		There is a shild support order.	
	b.		There is a child support order.	
			ou check b, fill in the following information:	
		i.	County and state where the child support order came from: County	State
		ii.	Court case number:	2000
		iii.	List the children the support case covers (initials only):	
			nation All of the basic information you need to tell the court is listed on this fo formation only if you need to explain something.	rm.
Provide Provide Petition Petit	one	er inj er's ask	formation only if you need to explain something. Request s the court to:	
Provide Provide Petition Petit	one oner	er inj er's ask	formation only if you need to explain something. Request	
Provide Petiti Petitio Check	one oner	er's ask	formation only if you need to explain something. Request s the court to:	
Petiti Petitio Check to an a	one oner	er inj	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent.	
Petiti Petitio Check to an a	oner all tittorr	er inj	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation.	
Petiti Petitio Check to an a A. B.	oner all tittorr	er inj er's ask aat aj aey. De Est Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees.	
Petiti Petitio Check to an a A. B. C. D. E.	oner all tittorr	er inj ask aak aj aey. De Esi Ord Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees. der that Respondent pay for Petitioner's attorney's fees	
Petiti Petitio Check to an a A. B. C. D.	oner all tittorr	er inj ask aak aj aey. De Esi Ord Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees.	
Petiti Petitio Check to an a A. B. C. D. E.	oner all tittorr	er inj ask aak aj aey. De Esi Ord Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees. der that Respondent pay for Petitioner's attorney's fees	
Petiti Petitio Check to an a A. B. C. D. E.	oner all tittorr	er inj ask aak aj aey. De Esi Ord Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees. der that Respondent pay for Petitioner's attorney's fees	
Petiti Petitio Check to an a A. B. C. D.	oner all tittorr	er inj ask aak aj aey. De Esi Ord Ord	Request s the court to: pply. The court will only consider items that are checked. If you do not know who cide custody and visitation. tablish legal parent. der child support and medical support. der that Respondent pay the court fees. der that Respondent pay for Petitioner's attorney's fees	

Rule 17.400—Form 401: Petition for Custody and Visitation (Parents not Married), continued

6.	Attorney Help Check one					
	A. An attorney did not help me	prepare o	or fill in this pape	er.		
	B. An attorney helped me prepared in the in the in the interior in the inter					
	Name of attorney or organization, if	any	Attorney's PIN—	Ask the a	attorney	
	Business address of attorney or orga	nization	City		State	ZIP code
	Attorney's phone number Att	orney's fa:	x number – optional	Attorn	ney's ema	til address – optional
8.	Check one A. □ Petitioner will accept service B. □ Petitioner will accept service Oath and Signature	of docur	ments in this cas	e at the	mailing	address below
	I, Print your name	hav	e read this Petit	ion, and	i i certif	y under penalty
	of perjury and pursuant to the laws of provided in this Petition is true and of		te of lowa that t	he infor	mation	I have
	Mailing address	City			State	ZIP code
	Phone number Email a	ıddress		dditional	email ac	ldress – if available
*	Whether filing electronically or in paper, you mu scan the form after signing it and then file electr		te your signature on ti	his form. Į	f you are j	filing electronically,

Important Notice to Petitioner

See next page for instructions for filing a Petition.

Instructions for Rule 17.400—Form 401: Petition for Custody and Visitation (Parents not Married)

Do not file these instructions

Instructions for Filing a Petition for Custody and Visitation

The Iowa Judicial Branch uses an electronic filing court system, known as the eFile System. You must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Petition electronically

- You must register to file electronically. For help, see the <u>eFile User Guide</u> and the instructions on the <u>eFile Instructions page</u> on the Iowa Judicial Branch website.
- After you have registered, log in to the eFile system to file electronically your custody case.
- With your Petition, you must also file an Original Notice (404) and a Protected Information Disclosure Form (411).
- You will receive a Notice of Electronic Filing when the clerk of court has approved the filing of
 your Petition and other documents.
- If there was a problem with your filing, you will receive a Notification of Electronic Filing in your
 eFile account. Log into My Filings, correct the error, and resubmit your filing. For help, see
 Resubmitting a Returned Filing.
- Log in to your eFile account and download and print your Petition and Original Notice so that you
 can serve it on (deliver it to) the other parent.
- For help finding and downloading your Petition and Original Notice, see <u>Managing your filings</u>.

Filing your Petition in paper

- To request permission from the court to file in paper, you must file a Motion for Exemption From Registration and E-filing [Rule 16.302(2)] along with your Petition (401), a Petition Cover Sheet (402), an Original Notice (404a), and a Confidential Information Form (403).
- Forms 401 and 404a: Make two photocopies if you can deliver copies of these forms to the other
 parent in person or by mail. Make three photocopies if you are going to ask the county sheriff or a
 civil process server to deliver these forms to the other parent.

Note about making photocopies: You should make your photocopies before you go to the courthouse to file your papers. It is expensive to make photocopies at the clerk of court office. It is cheaper to make the copies at a business that makes photocopies or at a public library.

- Forms 402, 403, and Motion for Exemption: You do not have to make photocopies of these forms.
- Take the original forms you filled in and the photocopies to the clerk of court office in your county.
 Tell the clerk at the counter you are filing a Petition for a custody case.

Instructions for Rule 17.400-Form 401: Petition for Custody and Visitation (Parents not Married), continued

- Give the clerk at the counter these forms:
 - 401 Petition for Custody
 - 402 Coversheet for a Petition for Custody
 - 403 Confidential Information Form (Do not make copies of this form.)
 - 404a Original Notice
- Pay the filing fee. If you cannot afford to pay the filing fee, prepare and file form 409.
- The clerk at the counter can tell you the amount of the filing fee. The Iowa legislature sets these fees and periodically raises them, so check with the clerk's office to confirm the current filing fee.
- The clerk of court will sign the Original Notice (404a). You will have to serve this form on (deliver it to) the other parent.
- The clerk at the counter will time-stamp each of the copies (original and photocopies).

Do not file these instructions

Rule 17.400—Form 402: Petition Cover Sheet for Custody and Visitation

Case number	County where	case is filed
etitioner		
Petitioner's first name	Middle name	Last name
Street address	City	State ZIP code
()_ Phone number	Email address	
ase name		
Petitioner's first name	Middle name	Last name
VS.		

Nature of the Case: EQUITY— Domestic Relations Custody and Visitation

Note to Petitioner

- Petitioner must complete this cover sheet if filing in paper and give it to the clerk of court when filing a Petition for Custody and Visitation (401).
- Do not serve this cover sheet on Respondent.
- This cover sheet is for statistical purposes only. It has no legal effect in the case.
- Electronic filers: Do not use this form. The information on this form is automatically generated when you submit your documents electronically.

Rule 17.400—Form 403: Confidential Information Form

This form is to be used by paper filers only.

Each party must complete one of these forms if filing in paper.

lowa Code section 602.6111 requires the parties to a case to provide the clerk of court with certain personal identification information. The clerk of court will keep each party's completed form confidential.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court for	ounty where your case	is filed County
lpon th	ne Petition of	Equity case no.	
	I CF Full name: first, middle, last ho files the Petition Cerning	Confiden	itial Information Form
	ident Full name: first, middle, last		
. Petit	tioner's Information		
$\overline{Full} n$	ame: first, middle, last	/ Birth date	Social Security number
	ame: first, middle, last pondent's Information	//	
Respond \overline{Full}_{r}	pondent's Information name: first, middle, last	Birth date / / Birth date	
Responding $\frac{Full r}{Full r}$	pondent's Information	//	
Respond \overline{Full}_{r}	pondent's Information name: first, middle, last dren's Information	//	
Full r	pondent's Information name: first, middle, last dren's Information d Full name first, middle, last	Birth date	Social Security number
Full r Chile	pondent's Information name: first, middle, last dren's Information d Full name first, middle, last	Birth date	Social Security number
Full r Chile	pondent's Information name: first, middle, last dren's Information d Full name first, middle, last	Birth date	Social Security number
Full 7 Child (1) (2)	pondent's Information name: first, middle, last dren's Information d Full name first, middle, last	Birth date	Social Security number
Full 7 Child (1) (2) (3)	pondent's Information name: first, middle, last dren's Information d Full name first, middle, last	Birth date	Social Security number

Continued on next page

Rule 17.400—Form 403: Confidential Information Form, continued

Signature of Provider	of Information			
Information provided by:	Print your full name: first, middle, last			
Your signature	Month	Dav	, 20 	
Do not give o	Important Notice:	at the cle	rk of court	
	Information provided by: Your signature	Print your full name: first, middle, last Your signature Month Important Notice:	Information provided by: Print your full name: first, middle, last	Information provided by: Print your full name: first, middle, last Your signature Month Day Year

Rule 17.400—Form 404: Original Notice for Personal Service

Petitioner must serve the Petition on Respondent within 90 days after filing the Petition.

Failure to meet this deadline may result in the court dismissing the custody and visitation case.

Read the <u>Guide to Representing Yourself in an Iowa Custody and Visitation Case (Parents not Married)</u> on the Iowa Judicial Branch website for additional important instructions. Iowa custody and visitation forms are available free of charge on the Iowa Judicial Branch website.

- If filing electronically, Petitioner must complete this form.
- If filing in paper, Petitioner must use form 404a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for $_{Co}$	enty where the Petition is f	County	
Upon the Petition of	Equity case no. Original Notice	ce for Personal S	Service
Petitioner Full name: first, middle, last and concerning			
Respondent Full name: first, middle, last			
 To Respondent Named Above Petitioner (the other parent) has filed a custod A copy of the Petition for Custody and Visitat 	•		pondent.
Petitioner's contact information during the	e custody and visita	tion case:	
Petitioner's name			
Mailing address	City	State	ZIP code
Phone number Email address			

Important instructions for Respondent on next page

If you need assistance to participate in court due to a disability, call the disability coordinator (information at www.iowacourts.gov). Persons who are hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.**

Rule 17.400—Form 404: Original Notice for Personal Service, continued

Instructions to Respondent

- A. You must file an Answer or a Motion with the clerk of court in the above county within 20 days after you receive this Original Notice. If you do not file an Answer or Motion within 20 days after receiving this Original Notice, the court may enter a judgment against you giving Petitioner what he or she asks for in the Petition.
- B. For help in your custody and visitation case, and for forms that you must use if you choose to represent yourself without an attorney, visit the Iowa Judicial Branch website at http://www.iowacourts.gov/ and click on "For the Public."
- C. If you received Petition form 401, you may use Answer form 415.
- D. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile and obtain a log in and password for filing and viewing documents in your case and for receiving service and notices from the court.
 - For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16, Iowa Rules of Electronic Procedure, available on the Iowa Judicial Branch website.
 - For court rules on Personal Privacy Protection in court filings, refer to Division VI of the Iowa Court Rules Chapter 16.
 - If you are unable to proceed electronically, you must receive permission from the court to file documents Contact the clerk of court in the county where the petition was filed for more information on being excused from electronic filing.
- E. If you electronically file your Answer or Motion, it will be served automatically on Petitioner or on Petitioner's attorney(s). A Notice of Electronic Filing will tell you if the court has excused Petitioner from electronic filing. If the court has excused Petitioner from electronic filing, you must mail a copy of your Answer or Motion to Petitioner.

Important Notice to Respondent

You should talk to an attorney at once to protect your interests.

Rule 17.400—Form 404a: Original Notice for Personal Service

Petitioner: Use this form only if you are filing documents in paper.

Read the *Guide to Representing Yourself in an Iowa Custody and Visitation Case (Parents not Married)* for additional important instructions. Iowa custody forms are available free of charge on the Iowa Judicial Branch website.

- If filing electronically, Petitioner must use form 404.
- If filing in paper, Petitioner must use this form.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

Upon the Petition of Petitioner Full name: first, middle, last	Equity case no. Original Notice for	_	
Petitioner Full name: first, middle, last	Original Notice fo	_	
and concerning		r Perso	onal Service
Respondent Full name: first, middle, last			
 A copy of the Petition for Custody and Visitatio Petitioner asks the court to address custody and Petitioner's contact information during the custody Mailing address	nd visitation.	State	ZIP code
()		2000	
Phone number Email address			
Instructions to Respondent Named Abo You must file an Answer or a Motion with the clerk of this Original Notice. If you do not file an Answer or the court may enter a judgment against you giving If you received Petition form 401, you may use Anse After you file your Answer or Motion, you must serv	court in the above county with Motion within 20 days after re Petitioner what he or she aske wer form 415.	eceiving this	s Original Notice,
(SEAL)			
Clerk	of Court	_	
Important Notice to Respondent You should talk to an attorney at once to protect your interests. City If you need assistance to participate in court due to a disability, call the Persons who are hearing or speech impaired may call Relay lowa TT	ne disability coordinator (informat	, lo	ty Courthouse owa ZIP code (www.iowacourts.gov)

August 2019 Rule 17.400—Form 404a Page 1 of 1

[Court Order July 19, 2019, effective September 1, 2019]

Rule 17.400—Form 405: Acceptance of Service

Petitioner must complete this section:

In the Iowa District Court for Coun	nty where Petition is filed	Cou	unty
Upon the Petition of	Equity case no.		
Petitioner Full name: first, middle, last	_ Acceptance	of Servi	ce
and concerning			
Respondent Full name: first, middle, last	_		
Petitioner must file this form with the clerk of court soc	on after Respondent signs it.		
Respondent must complete this section:			
Respondent's Acceptance of Service, of Respondent completes this Acceptance of Service, Resigning it. Petitioner will file it with the clerk of court	espondent must return this form to	Petitioner so	oon after
I,	t to the laws of the State of lo	ptance of owa that t	Service.
Signed:, 20	Respondent's signature		
Respondent's mailing address	City	State	ZIP code
() Phone number			

Important Notice to Respondent

By signing this form, you are not agreeing to what Petitioner wants. You are only agreeing that you received a copy of the Original Notice and Petition.

Rule 17.400—Form 406: Directions for Service of Original Notice

Petitioner: Complete this form if the sheriff or a process server will deliver the Petition and Original Notice to Respondent.

- Do not use this form if Respondent has already received the Petition and Original Notice and signed an Acceptance of Service (form 405).
- Do not file this form with the clerk of court in paper or electronically.
- Give this form to the sheriff or other process server with your Petition (form 401) and Original Notice (form 404 if electronically filing or form 404a if filing in paper).

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

oı	nty wher	re Petition is filed E	quity case number		
		and Location of Sheriff on the and fill in the blanks	r Other Process Serv	er	
	A. 🗆	Sheriff In county where Responde	nt will be served _County		
		Street address	City	State	ZIP code
	В. 🗌	Other process server			
		Name of other person serving the No	ptice		
		Street address	City	State	ZIP code
•	Perso	on to be Served			
	The other	er parent's name	Phone number		
	Address	where the other parent can be serve	cd City	State	ZIP code
•	Perso	n Requesting Service			
	Your na	те	Phone number		
	Your pre	esent mailing address	City	State	ZIP code
		al Instructions for Service	Provide information that wi	ll help the sheriff or	process serve
		ng papers to Kesponaent.			

Rule 17.400—Form 406: Directions for Service of Original Notice, continued

5.	Costs of Service Check one	
	A. Petitioner will pay the costs of the Sheriff If you cannot afford the costs, file form 409.	or other process server.
	B. Costs for Sheriff deferred by court order:	Clerk of court: Sign only if costs deferred by court order
6.	Notification	
	After completion of service, the sheriff or other procrequesting service.	cess server will notify the person
	, 20	
	Date Signed: Month Day Year	Your signature

Rule 17.400—Form 407: Motion and Affidavit to Serve by Publication

Petitioner: Use this form only if you do not know where the other parent lives or works.

- You must contact a newspaper that is generally distributed or circulated throughout the county where you filed the Petition.
- Ask if the newspaper will publish your Original Notice by Publication (form 408) in your custody and visitation case.
- Tell the newspaper you need to publish the Notice once each week for three weeks in a row.
- If the newspaper can publish your Notice three weeks in a row, ask how much it will cost.
- Tell the newspaper you will call back to arrange for publishing your Notice after a judge gives you permission to publish your Notice in the newspaper.
- The fees for publication are set by statute in Iowa Code section 618.11.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	OrCounty where the Petit.		ounty
Upon the Petition of	Equity case no	ı	
- 444	Motion		it to Serve by
Petitioner Full name: first, middle, last		Publicati	on
Full name of Petitioner as it is in the original case			
and concerning			
Respondent Full name: first, middle, last			
 A. Respondent's residence Check each that applies (1) Respondent lives outside of loward (2) Respondent's residence and plant 		nknown.	
B. Respondent's last known residence:			
B. Respondent's last known residence: Street address	City	State	ZIP code
Street address County	() Phone number	Email a	ddress
Street address	() Phone number	Email a	ddress

Rule 17.400—Form 407: Motion and Affidavit to Serve by Publication, continued

D.	Petitioner has taken these steps to find Respondent:
E.	Petitioner will publish notice in this newspaper: Name of newspaper

F. Petitioner asks the court to allow Petitioner to serve Respondent by publication because Respondent cannot be personally served.

Continued on next page

Rule 17.400—Form 407: Motion and Affidavit to Serve by Publication, continued

	orn ck or	ney Help ne							
A.		An attorney did	l not hel	p me prep	are or fill in	this paper.			
B.		An attorney he If you check B,	•			•			
		Name of attorney	or organi	ization, if an	y		Attorney's P	PIN – A	sk attorney
		Business address	of attorne	ry or organiz	zation	City	<u>.</u>	State	ZIP code
		()	()			., ,		
		() Attorney's phone	no. At	ttorney's fax	no. – optional	Attorney's e	mail address –	optional	!
Oat		Attorney's phone		ttorney's fax	no. – optional	Attorney's e	mail address –	optional	!
Ι,	th a	and Signature				·	mail address – i and Affidav		
l, <i>Pi</i> und	th a	and Signature your name penalty of perjui	ry and p	ursuant to	_, have read	d this Motion	ı and Affidav	it, and	d I certify
l, <i>Pi</i> und	th a	and Signature	ry and p	ursuant to	_, have read	d this Motion	ı and Affidav	it, and	d I certify
I, Pr und hav	th a rinty der p	and Signature your name penalty of perjuit rovided in this M	ry and p Motion a	ursuant to nd Affidav	_, have read the laws of it is true and	d this Motion the State of d correct.	ı and Affidav	it, and	d I certify
l, Pr und hav	th a rinty der p	and Signature your name penalty of perjui	ry and p Motion a	ursuant to nd Affidav	_, have read the laws of it is true and	d this Motion	ı and Affidav	it, and	d I certify
I, und hav	th a	and Signature your name penalty of perjuit rovided in this M	ry and p Motion a	ursuant to nd Affidav	_, have read the laws of it is true and	d this Motion the State of d correct.	ı and Affidav	rit, and	d I certify

^{*} Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.400—Form 408: Original Notice by Publication

Petitioner: Complete this form only if a judge has signed an order giving permission to publish this Notice in a newspaper.

After you take this Notice to the newspaper, promptly mail a copy of this Notice and the Petition to Respondent's last known mailing address.

Note to Petitioner: Fill in third date of publication in section 2 below.

 $If you \ do \ not \ understand \ how \ to \ use \ this form, \ or \ if \ you \ should \ use \ this form, \ talk \ to \ an \ attorney.$

Newspaper: Publish only the information below this line.

In the Iowa District Court for	County Where the Petition is filed			
Upon the Petition of	Equity case no.			
Petitioner Full name: first, middle, last	Original Notice by Publication			
and concerning				
Respondent Full name: first, middle, last				
Petitioner's contact information during the cus Petitioner's name: First, middle, last Petitioner's present street address	dy and visitation lawsuit naming you as Respondent. stody and visitation case:			
County () Phone number	Email address			
2. Respondent's Deadline for Filing a Res You must file an Answer or a Motion with the receiving this notice. Month Day 70 Year	sponse clerk of court in the above county within 20 days after			

Rule 17.400—Form 408: Original Notice by Publication, continued

3. Instructions to Respondent Named Above

You must file an Answer or a Motion with the clerk of court in the above county within **20 days** after the date provided above. If you do not respond, the **court may enter a judgment against you** giving Petitioner what he or she asked for in the Petition. You must register to eFile through the Iowa Judicial Branch website at https://www.iowacourts.state.ia.us/Efile/ and obtain a log in and password to file and view documents in your case and to receive service and notices from the court. For general rules and information on electronic filing, refer to the Iowa Court Rules Chapter 16, Iowa Rules of Electronic Procedure, available on the Iowa Judicial Branch website. For court rules on the Personal Privacy Protection in court filings, refer to Division VI of the Iowa Court Rules, Chapter 16.

Important Notice to Respondent

- You should talk to an attorney at once to protect your interests.
- If you choose not to have an attorney represent you in this matter, go to the Iowa Judicial Branch website for self-represented litigant information and family law forms.

If you need assistance to participate in court due to a disability, call the disability coordinator (information at http://www.iowacourts.gov). Persons who are hearing or speech impaired may call Relay lowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.**

Rule 17.400—Form 408a: Proof of Service by Publication

Petitioner: Use this form only if you filed Form 407 and the court approved your request to serve Respondent by publication.

 Get proof from the newspaper that published your Original Notice by Publication (408) once each week for three weeks in a row. • Scan in that proof along with this Form 408a.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the lo	wa Dis	trict Cour	t for	County when	re you filed th	ne Petition	_Count	У
Jpon	the Petiti	ion of			Equ	ity case no)		
Petitic	oner Full n	ame: first, n	niddle, last		-	Proof of	Service by	Public	ation
ınd co	oncerning								
Respo	ondent	Full name: j	first, middle, last		-				
1. In	formatio	n and F	Requests						
A.	Petitioner	publish	ed notice in	this news	paper:				
A.	Petitioner	publish	ed notice in	this news	spaper:	Jame of news	paper		
			ed notice in ed notice o		λ	Iame of news	paper		
		publish	ied notice o	n these th	λ ree dates:	Jame of news _l	paper		, 20
		publish	ed notice o	n these th	Aree dates:	Jame of news _l	paper	Day	, 20 <u> </u>
B.	Petitioner Month Petitioner (Form 401	Day mailed to the	ned notice o 20	n these the Month ne Original nt's last know	nee dates: Day Notice by	20Year	paper	Day	
B.	Petitioner Month Petitioner (Form 401	Day mailed t's Last K	Year a copy of the Responder	n these the Month ne Original nt's last know	nee dates: Day Notice by own addre	20Year	paper Month	Day B) and th	e Petition
B.	Month Petitioner (Form 401 Respondent on this da	publish Day mailed 1) to the t's Last K	aed notice o 20 Year a copy of the Responder	Month ne Original nt's last knowleddress	nee dates: Day Notice by own addre	20Year	paper Month	Day B) and th	e Petition

Rule 17.400—Form 408a: Proof of Service by Publication, continued

2.	Attorney Help Check one					
	A. An attorney did no	ot help me prepare	or fill in this p	aper.		
	B. An attorney helpe	d me prepare or fill	in this paper.	•		
	Name of attorney or o		<u> </u>	PIN – Ask the	attorney	
	Business address of a	ttorney or organization	City		State	ZIP code
	()	aber ()			
3.	I, Print your name under penalty of perjury a have provided in this Mot	ind pursuant to the ion and Affidavit is t	laws of the S	tate of lowa		
	Signed on: Month	Day, 20Year	Your signatu	ıre*		
	Mailing address	City	,		State Z	IP code
	() Phone number	Email address		Additional	mail addras	SS – if available
*	* Whether filing electronically or in		ite vour signatur			-
	scan the form after signing it and		ne your signaure	on mis joint. If	you are jung	; escin omeany,

Rule 17.400—Form 409: Application and Affidavit to Defer Payment of Costs

Petitioner: Use this form only if you cannot afford to pay the fees to file and serve the Petition.

- Use this form if it would cause you to suffer a hardship if you had to pay the filing fee and cost of serving papers.
- You may need to provide proof of your income and assets and your expenses.
- Costs and fees paid to someone other than the court or sheriff cannot be walved. For example, you may have to pay to publish a legal notice in the newspaper or to hire an expert to testify.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for \overline{C}	County where the petition is filed		
Jpon the Petition of	Equity case no.		
Petitioner Full name: first, middle, last	Application and Affidavit to Defer Payment of Costs		
and concerning			
Respondent Full name: first, middle, last			
1. Request and Information			
A. I am Petitioner.			
B. For my Application and Affidavit, I state to Check all that apply	that:		
(1) I am unable to pay the filing fee or so	ervice costs or other court costs.		
(2) \(\subseteq I ask the court for permission to prod	ceed without prepayment of costs and fees.		
(3) 🔲 I am filing this Application and Affida	avit in good faith.		
(4) I believe I am entitled to what I am a	sking for in this case.		
C. Household			
There are people living in my hous	sehold.		
D. My household income is \$	per month.		
	efore deductions for all members of your household.		
E. My income comes from: List the sources of your income. Examples: salary	y, wages, or benefits such as unemployment, Title 19, FIP.		
Contini	ied on next page		

Rule 17.400—Form 409: Application and Affidavit to Defer Payment of Costs, continued

F.	My household has th	e following monthly expenses:
	(1) Rent or mortgage	\$
	(2) Utilities	\$
	(3) Phone	\$
	(4) Food	\$
	(5) Transportation	\$
G.	I have \$	in cash, checking, and savings.

Continued on next page

Rule 17.400—Form 409: Application and Affidavit to Defer Payment of Costs, continued

A. 🗆 B. 🗆								
	An attornev did ı	not help n	ne prepare or	fill in this paper.				
	Name of attorney or organizati		on, if any	Attorney's PIN – Ask the attorney				
	Business address of	attorney or	organization	City	State	ZIP code		
	()_ Attorney's phone m		_()_	x number – optional				
Section	fication of Serv	ly if filing i	n paper or if the	other party is exem		c filing.		
This do	cument, if filed electr	•	•	_	-			
l,	your name		, cert	ify that on <i>Month</i>		, 20		
Name o	f person to whom I de	elivered or i	nailed it	-				
Party's	or attorney's mailing	z address	City	,	State	ZIP code		
I,the Sta	Print your name ate of lowa that I had bed in this Application	ave read t	his Application					
Signed	on: Month	Day,	20 <u>Year</u>	Your signature*				
Mailing	g address		City		State	ZIP code		

Rule 17.400—Form 410: Affidavit of Service of Original Notice and Petition for Custody and Visitation

Petitioner: Use this form only if Respondent did not sign an Acceptance of Service (form 405) or a person who is not a sheriff or a process server delivered a copy of the Petition and Original Notice to Respondent (the other parent).

- The person, other than Petitioner, who gave the Petition and Original Notice to Respondent, fills in this form.
- Petitioner, or the person who gave the Petition and Original Notice to Respondent, must file this form with the clerk of court.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa [District Court for_	County where	the Petition is filed	ounty
Jpon the Petition of		Equity cas	e no	
Petitioner Full name: first, mid	ddle last		vit of Service of 0 tition for Custod	
				,
and concerning				
Respondent Full name: first, m	iddle, last			
1. Affidavit				
l, Name of person – Cannot be		, delivered	a copy of the Origin	nal Notice and
Name of person – Cannot b	e Petitioner, sheriff, or pro	cess server	.,	
Petition for Custody and	Visitation for this ca	se to:		<i>Check one</i> □ a.m.
	on		, 20a t <i>Dav Year</i>	
Name of Respondent	Mo	onth	Day Year	Time
by handing Respondent	copies of the attach	ed papers.		
2. Oath and Signature To be completed by the person I, Print your name	_	_		rvice, and I certify
under penalty of perjury have provided in this Aff	•			he information I
Signed on:				
Month		Your sign	ature*	
Mailing address	Cii	y	State	ZIP code
() Phone number	Email address		Additional email	address – if available
* If you are filing electronically, so	can the form after signing i	t and then file e		-

Rule 17.400—Form 411: Protected Information Disclosure

It is the responsibility of coursel, if any, and the parties to ensure that protected information is omitted or redacted from documents or exhibits filed with the court. The clerk of court will not review filings to determine whether the required omissions or redactions have been made. For electronic filers, see Division VI of the Iowa Rules of Electronic Filing in chapter 16 of the Iowa Court Rules. For paper filers, see Iowa Rule of Civil Procedure 1.422.

Use this form to identify the full version of any protected information redacted in other documents you have filed.

■ If filing electronically:

- Petitioner must complete this form (411) and file it with the Petition (form 401) and Original Notice (form 404).
- Respondent must complete this form if adding or correcting protected information.
- Paper filers also may use form 411 to assist in complying with Iowa Rule of Civil Procedure 1.422. If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for $_$	ounty where the case is filed County
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Protected Information Disclosure
and concerning	
Respondent Full name: first, middle, last	

For electronic filers:

When protected information, as defined in lowa Court Rule 16.602, is required by law to be included or is material to the case and must be included in nonconfidential documents, a party shall include the protected information on this form.

For an explanation of a filer's responsibility and the procedures to use for protecting personal information, refer to lowa Court Rules: Chapter 16, Rules of Electronic Procedure, Division VI, Personal Privacy Protection. Rule 16.602 provides the list of protected information. Rule 16.604 provides a list of information that may be redacted.

1. Petitioner The parent who filed for custody and visitation.

Provide the complete version of protected information and the redacted version included in documents you file.

Protected information type	Complete i	nformation	Redacted information	1
First	Middle	Last		
Name				

Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
A. Social security number	<i>XXX-XX-XXXX</i>	Last four digits only
B. Date of birth	/ mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 <i>XXX-XX-XXXX</i>	Last four digits only

Name_

Rule 17.400—Form 411: Protected Information Disclosure, continued

D.	Personal identification numbers (if no social security number)	Full number	Partial only
E.	Other unique identifying numbers	Full number	Partial only
F.			
	Additional protected information	Full information	Partial information
G.			
	Additional protected information	Full information	Partial information
H.			
	Additional protected information	Full information	Partial information
I.			
	Additional protected information	Full information	Partial information

2. Respondent The other parent who did not file for custody and visitation.

Provide the complete version of protected information and the redacted version included in documents you file. If Petitioner is filling out this form, provide as much information about Respondent as you can.

First	Middle Las	t
Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
A. Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
B. Date of birth	/ / mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
D. Personal identification numbers (if no social security number)	Full number	Partial only
E. Other unique identifying numbers	Full number	Partial only
F. Additional protected information	Full information	Partial information
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information
l. Additional protected information	Full information	Partial information

Check this box if you are attaching a separate sheet listing additional information for Respondent.

Check this box if you are attaching a separate sheet listing additional information for Petitioner.

Partial information

Rule 17.400—Form 411: Protected Information Disclosure, continued

3. Other Parties

Provide the complete version of protected information and the redacted version included in documents you file. Provide as much information about other parties as you can.

ne		
First	Middle	Last
Protected information type	Complete information (See Rules 16.602 and 16.604)	
A. Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
B. Date of birth	mm/dd/yyyy	Year only
C. Individual taxpayer identification numbers	 XXX-XX-XXXX	Last four digits only
D. Personal identification numbers (if no social security number)	Full number	Partial only
E. Other unique identifying numbers	Full number	Partial only
F. Additional protected information	Full information	Partial information
G. Additional protected information	Full information	Partial information
H. Additional protected information	Full information	Partial information

4. Children

Additional protected information

Provide the complete version of protected information and the redacted version included in documents you file.

A.	Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

Full information Check this box if you are attaching a separate sheet listing additional information for other parties.

Rule 17.400—Form 411: Protected Information Disclosure, continued

B.	Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
	(3) Date of birth	mm/dd/yyyy	Year only

C.	Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

D.	Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 <i>XXX-XX-XXXX</i>	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

E.	Protected information type	Complete information (See Rules 16.602 and 16.604)	Redacted information (See Rule 16.605)
	(1) Child's full name	First, middle, last name	Child's initials
	(2) Social security number	 XXX-XX-XXXX	Last four digits only
	(3) Date of birth	/ / mm/dd/yyyy	Year only

[☐] Check this box if you are attaching a separate sheet listing additional children.

Rule 17.400—Form 411: Protected Information Disclosure, continued

Information provided b	JV.
--	-----

	/s/		
Handwritten signature of Petitioner or attorney if filing in paper	Electronic signa if filing electroni		or attorney
Law firm, if applicable			
Mailing address	City	State	ZIP code
()Phone number			
Email address	Additional email ad	dress, if applicab	le
Month Day Year Date signed	-		

Rule 17.400—Form 412: Joint Statement to Disestablish Legal Parent

- The parties use this form if both parties want the court to find that one of the parties is not a legal parent of the child.
- This form tells the court that both parties agree that one party is not a biological parent and should be disestablished as (should no longer be) a legal parent of the child.
- For purposes of this form, legal parent is a person who is recognized by law as a parent to the child because of a birth certificate, affidavit, child support order, or other legal document.

In the lowa District Court for	County where your case is filed
Upon the Petition of	Equity case no
Petitioner Full name: first, middle, last and concerning	Joint Statement to Disestablish Lega Parent
Respondent Full name: first, middle, last	_
1. Legal Parent is a legal Petitioner's or Respondent's name following child or children:	parent but not a biological parent of the

List each child's initials and birth year

Initials only: First, middle, & last initials of each child	Birth <u>vear</u>
(1)	
(2)	
(3)	

Initials only: First, middle, & last initials of each child	Birth <u>year</u>
(4)	
(5)	
(6)	

Check this box if you have attached a sheet listing additional children for whom Petitioner or Respondent is not a biological parent.

Rule 17.400—Form 412: Joint Statement to Disestablish Legal Parent, continued

2. Biological Parent

The biological parents, if known, of the children are as follows:

	First,	ls only: middle, & last s of each child	Biological parents	
	(1)			
	(2)			
Γ	(3)			
	(4)			
Γ	(5)			
	(6)			
3.	Ger	netic Tests		
A	١.	We agree to co	operate with getting any genetic test that the court orders.	
Е	3.	We understand	that we may have to pay for any genetic test that the court orders.	
C) .	Testing:		
		Check(1) or(2)		
		(1) Genetic f	ests have not been done.	
			rests* have been done and showis not to all parent.	he
		verified documer	c tests: Genetic testing must be done by an accredited laboratory with nation of the chain of custody, and the laboratory must send the evaluation the clerk of court. See lowa Code sections 600B.41 and 600B.41A.	1
4.	Chi	ld Support Re	covery Unit (CSRU)	
C_{i}	heck o	one		
Α	. 🗆	CSRU is provid	-	
_		· ·	ve a copy of this Motion to CSRU if it is providing services.	
В	. 🗆	CSRU is not pr	oviding services.	

Rule 17.400—Form 412: Joint Statement to Disestablish Legal Parent, continued

5.	5. Best Interests of the Children		
lt i	It is in the best interests of the child(ren) that		
is	$\overline{\textit{Petitioner's or Respondent's}}$ is found not to be a legal parent of the child(ren).	name	
6.	6. Request		
W	We ask the court to:		
A.	A. Appoint a guardian ad litem (an attorney) for the child or children. Very that we may have to pay the costs of the guardian ad litem.	Ve unde	rstand
B.	B. Order genetic tests if needed and order that Petitioner, Responden go for testing. We understand that we may have to pay for any ge the court orders.	-	
C.	C. Find that, if excluded by genetic test	ting, is n	ot a
7	biological parent of the child or children listed in section 1 above, a disestablish that person as a legal parent of the child or children.	ind that t	the court
1.	7. Attorney Help		
	a. Petitioner Check one		
	i. An attorney did not help me prepare or fill in this paper.		
	ii. An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information:		
	if you check (2), you must fin in the following information.		
	Name of attorney or organization, if any Attorney's PIN – Ask the	attorney	
	Business address of attorney or organization City	State	ZIP code
	Attorney's phone number Attorney's fax number – optional Attorne	ey's email	a ddusaa
	Attorney's phone number Attorney's fax number - optional Attorne	ey s emaii	adaress
	1. Barrandard of 1		
	b. Respondent Check one		
	i. An attorney did not help me prepare or fill in this paper.		
	ii. An attorney helped me prepare or fill in this paper. If you check (2), you must fill in the following information:		
	Name of attorney or organization, if any Attorney's PIN – Ask the a	attorney	
	Business address of attorney or organization City	State	ZIP code
	(ney 's email	l addrass
	Auorney's prione rumoer Auorney's jax rumoer – optional Attorn	iey s email	adaress
	Continued on next page		

Rule 17.400—Form 412: Joint Statement to Disestablish Legal Parent, continued

8. Oaths and Signatures

Print your name	, h	ave read this J	oint Statement,	and I certify u	nder penalty
perjury and pursuar	nt to the laws of	the State of lov	wa that the info	rmation I have	provided
in this Joint Stateme					•
	20				
Month	\overline{Dav}	Year Pe	titioner's signati	ıre*	
1,10,101	2,	100.	3 33,7140		
Mailing address		City		State	ZIP code
g					
()					
Phone number	Email 6	address	Ada	ditional email ac	ddress – if availa
Whether filing electrons electronically, scan the				ı this form. If you	i are juing
electronically, scan the	form after signing	it and then file ele		n this form. If you	i are juing
electronically, scan the	form after signing that	it and then file ele re	ctronically.		, ,
electronically, scan the Respondent's Oat	form after signing	it and then file ele re	ctronically.		, ,
electronically, scan the Respondent's Oat	form after signing that and Signatu, h	it and then file ele	ctronically.	and I certify u	nder penalty
Respondent's Oat I,	form after signing thand Signatu, hand hand hand had been been been been been been been bee	it and then file ele re ave read this J the State of lo	ctronically.	and I certify u	nder penalty
electronically, scan the Respondent's Oat I,	form after signing thand Signatu, hand hand hand had been been been been been been been bee	it and then file ele re ave read this J the State of lo	ctronically.	and I certify u	nder penalty
electronically, scan the Respondent's Oat I, Print your name perjury and pursuar	th and Signatu, hat to the laws of ent is true and co	it and then file ele re ave read this J the State of lover orrect.	ctronically. oint Statement, wa that the info	and I certify u rmation I have	nder penalty
Respondent's Oat I, Print your name perjury and pursuar in this Joint Stateme	th and Signatu, hat to the laws of ent is true and co	it and then file ele re ave read this J the State of lover orrect.	ctronically. oint Statement, wa that the info	and I certify u rmation I have	nder penalty
electronically, scan the Respondent's Oat I, Print your name perjury and pursuar	th and Signatu, hat to the laws of ent is true and co	it and then file ele re ave read this J the State of lover orrect.	ctronically.	and I certify u rmation I have	nder penalty
Respondent's Oat I, Print your name perjury and pursuar in this Joint Stateme	th and Signatu, hat to the laws of ent is true and co	it and then file ele re ave read this J the State of lover orrect.	ctronically. oint Statement, wa that the info	and I certify u rmation I have	nder penalty
Respondent's Oat I, Print your name perjury and pursuar in this Joint Statemen	th and Signatu, hat to the laws of ent is true and co	re ave read this J the State of lovorrect. Year Re	ctronically. oint Statement, wa that the info	and I certify u rmation I have	nder penalty
Respondent's Oat I, Print your name perjury and pursuar in this Joint Stateme	th and Signatu, hat to the laws of ent is true and co	it and then file ele re ave read this J the State of lover orrect.	ctronically. oint Statement, wa that the info	and I certify urmation I have	nder penalty provided
Respondent's Oat I, Print your name perjury and pursuar in this Joint Statemen	th and Signatu th and Signatu th to the laws of ent is true and company Day	re ave read this J the State of lovorrect. Year Re	ctronically. oint Statement, wa that the info	and I certify urmation I have	nder penalty provided

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.400—Form 413: Motion to Disestablish Legal Parent

- A party uses this form if one of the parties wants the court to find and conclude that one of the parties is not a biological parent of the child and should be *disestablished* as (should no longer be) a legal parent of the child.
- For purposes of this form, **legal parent** is a person who is recognized by law as a parent to the child because of a birth certificate, affidavit, child support order, or other legal document.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District	Court for	ounty where your case is filed	County
Jpon	the Petition of		Equity case no	
Petiti	oner Full name first, middle,	last	Motion to Disestak	olish Legal Parent
and co	oncerning			
Resp	ondent Full name first, mi	iddle, last		
	☐ Respondent gal Parent			
of t	the following child or child the following child or child the last each child's initials and linitials only:	me dren: birth year	rent but may not be a biological rent but may not be a biological	Pieth year
of t	the following child or chi	me Idren:		st Birth <u>year</u>
of t	the following child or chi List each child's initials and Initials only: First, middle, & last	me dren: birth year	Initials only: First, middle, & las	st Birth <u>year</u>
of t	the following child or chi List each child's initials and Initials only: First, middle, & last initials of each child	me dren: birth year	Initials only: First, middle, & las initials of each chi	st Birth <u>year</u>

3.

4.

Rule 17.400—Form 413: Motion to Disestablish Legal Parent, continued

2. Biological Parent

The biological parents, if known, of the children are as follows:

Fir	rst,	s only: middle, & last s of each child	Biological parents
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
Ge	ne	tic Tests	
A.		I agree to coop	erate with getting any genetic test that the court orders.
B.		I understand th	at I may have to pay for any genetic test that the court orders.
C.		Testing:	
		Check(1) or(2).	
		(1) Genetic	tests have not been done.
		(2) Genetic	tests* have been done and showis not the
		biologica	Petitioner's or Respondent's name al parent.
		*Note on geneti verified documen	c tests: Genetic testing must be done by an accredited laboratory with nation of the chain of custody, and the laboratory must send the evaluation the clerk of court. See lowa Code sections 600B.41 and 600B.41A.
Chi	ild	Support Reco	overy Unit (CSRU)
Che			
Α.		CSRU is provid	ling services. ve a copy of this Motion to CSRU if it is providing services.
B.	\Box		oviding services.
Ο.	Ш	CONO IS HOLDE	oviding services.
			Continued on next page

Rule 17.400—Form 413: Motion to Disestablish Legal Parent, continued

5.	. Best Interests of the Children	
	It is in the best interests of the child(ren) that	
	is found not to be a legal parent of the child(ren).	etitioner's or Respondent's name
6.	. Request	
	I ask the court to:	
	 A. Appoint a guardian ad litem (an attorney) for the child or cl may have to pay the costs of the guardian ad litem. 	hildren. I understand that I
	B. Order genetic tests if needed and order that Petitioner, Re go for testing. I understand that I may have to pay for any court orders.	
	C. Find that, if excluded by ge Petitioner's or Respondent's name biological parent of the child or children listed in section 1 disestablish that person as a legal parent of the child or children listed in section 1 disestablish that person as a legal parent of the child or children listed in section 1 disease.	
7.	. Attorney Help	
	Check one	
	A. An attorney did not help me prepare or fill in this paper	·.
	B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information:	
	Name of attorney or organization, if any Attorney's PIN	– Ask the attorney
	Business address of attorney or organization City	State ZIP code
	(Attorney's email address – optional
	Party's or attorney's mailing address City	State ZIP code

Rule 17.400—Form 413: Motion to Disestablish Legal Parent, continued

I,		, certify that on			, 20
Print your name			Month	D_{ℓ}	ay Yea
I mailed or gave a copy of thi	s Motion to the	e other party or the	other party	s attorney	at this addres
Name of person to whom I deliv	 ered or mailed	it			
Oath and Signature					
l,			_ 14 5	l	
		, certify under per	aity or perju	ry and purs	suant to the
Print your name					
Print your name laws of the State of lowa that I					
Print your name					
Print your name laws of the State of Iowa that I Motion is true and correct.					
Print your name laws of the State of lowa that I		Motion and that the	information		
Print your name laws of the State of lowa that I Motion is true and correct. Signed on:	have read this	Motion and that the	information		
Print your name laws of the State of lowa that I Motion is true and correct. Signed on:	have read this	Motion and that the	information		
Print your name laws of the State of lowa that I Motion is true and correct. Signed on: Month	have read this	Motion and that the	information	I have prov	vided in this

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Respondent: You must file an Answer in the county where the Petition was filed within **20 days** after receiving the Petition and Original Notice, or the **court may enter a judgment against Respondent** giving Petitioner what he or she asked for in the Petition.

- Read the <u>Guide to Representing Yourself in an Iowa Custody and Visitation Case (Parents not Married)</u> on the Iowa Judicial Branch website before using this form.
- Use this Answer form 415 if you received Petition form 401, otherwise use form 416.
- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (form 411) if you have not already done so.
- If filing in paper, you may use form 411.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for County	County where the other parent filed the Petition			
Upon the Petition of	Equity case no.			
Petitioner first, middle, last The other parent's full name	Answer to Petition for Custody and Visitation			
and concerning				
Respondent first, middle, last Your full name				
 Personal Information Fill in all information the A. Petitioner's information Check one If paragraph 1A of the Petition (form 401) is not of (1) Petitioner's (the other parent's) birth y 				
(2) Petitioner's birth year and present res The correct information is: Birth year	•			
Present street address () County Telephone number	City State ZIP code Email address			

2.

Rule 17.400—Form 415: Answer to Petition for Custody and Visitation, continued

	Check o		nformation		
			f the Petition (form 401) is not c	correct, check (2) and fill in th	ne blanks.
	(1)	Respond	lent's (your) birth year and pr	esent residence are correc	ot in the Petition.
	(2)	Respond	lent's birth year and present i	residence are not correct in	n the Petition.
		The corre	ect information is:		
			Birth year		
		Present st	reet address	City	State ZIP code
		i resem si		•	State 211 code
		County	() Telephone number	Email address	
C.	Fill in a Check o	is much info one	f any, who has visitation of brmation as you know. If the Petition (form 401) is not c		
		The infor	mation for the other person vis correct in the Petition.		
	(2)		mation for the other person vis not correct in the Petition.		
		Full name	e: first, middle, last		
			r: first, middle, last reet address		State ZIP code
		Present st	reet address		State ZIP code
				City Email address	State ZIP code
Ge	eneral	Present st	reet address	Email address	State ZIP code
	Childre Check o	Present st County Information	reet address () Telephone number tion about the Parties a	Email address and the Children	
	Childre Check of If parag	Present st County Information en one craph 2A of	treet address () Telephone number tion about the Parties a	Email address and the Children correct, check (2) and comple	te section A(2).
	Childre Check of If parag	County Information one graph 2A of	treet address () Telephone number tion about the Parties a f the Petition (form 401) is not of the Petition provides the correct in t	Email address and the Children correct, check (2) and comple information about the partic	te section A(2). es and children.
	Childre Check of If parag	County Information one craph 2A of The F	treet address () Telephone number tion about the Parties a	Email address and the Children correct, check (2) and comple information about the particorrect information about	te section A(2). es and children. the parties and children.
	Childre Check of If parag	County Information one craph 2A of The F	Telephone number tion about the Parties at the Petition (form 401) is not at the Petition provides the correct in Petition does not provide the	Email address and the Children correct, check (2) and comple information about the partic correct information about the essary, provide an explanation ge 18 who are the biologic	te section A(2). es and children. the parties and children. on in section 4 below.
	Childre Check of If parag	Present st County Information one craph 2A of The I Comp	Telephone number tion about the Parties at the Petition (form 401) is not of the Petition provides the correct in Petition does not provide the plete section A(2) below. If necessity petitioner and Respondent	Email address and the Children correct, check (2) and comple information about the partic correct information about the essary, provide an explanation ge 18 who are the biologic inge 18 who are the biologic	te section A(2). es and children. the parties and children. on in section 4 below.
	Childre Check of If parag	County Information one oraph 2A of The F Comp	Telephone number Telephone number tion about the Parties a f the Petition (form 401) is not of Petition provides the correct if Petition does not provide the plete section A(2) below. If necessary There are children under a petitioner and Respondent There are children under a	Email address and the Children correct, check (2) and comple information about the partice correct information about the essary, provide an explanation ge 18 who are the biologic ge 18 who are the biologic	te section A(2). es and children. the parties and children. on in section 4 below. al children of both al children of one party and

B.	Identification of children Check one								
	If paragraph 2B of the Petition (form 401) is not correct, check (2) and provide the correct information about the children's identification.								
	(1) The children are identified correctly in the Petition.								
	(2) The children are not identified correctly in the Petition. The correct information is:								
	Child (1) Child (2) Child (3) Child (4) Child (5) Child (6)								
		First, middle, & last initial							
		Birth year							
		☐ Check this box if you	are attachir	ng a separat	e sheet listii	ng additiond	al children.		
C.	Leg	al parents							
		ck one							
		ragraph 2C of the Petition (for tt the legal parents of the child		ot correct, o	check (2) an	d provide th	ie correct in	formation	
	(1) [☐ The legal parents of th	e children	are identifi	ed correctly	in the Pet	tition.		
	(2)	The legal parents of the information is:	e children a	are not ider	ntified corre	ectly in the	Petition. T	ne correct	
		each child of the parties, state ng or paternity affidavit, check						hed by gene	tic
			Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)	
	Leg	al parents established?							
		Yes							
		No							
		Unknown							
	If es	stablished, state how:							
		Prior court order							
		On birth certificate							
		Other (explain in section 4)							

D. Children's living arrangements	D.	Children's	living	arrangements
-----------------------------------	----	------------	--------	--------------

Check one If paragraph 2D of the Petition (form 401) is not correct, check (2) and provide the correct information about the children's residence. (1) The information about where the children have lived is listed correctly in the Petition. (2) The information about where the children have lived is not listed correctly. The correct information is: List children by initials only Child (1) Child (2) Child (3) Child (6) Child (4) Child (5) Children's i. initials Lived with Adult Name Citv State **Dates** From mm/dd/yyyy To mm/dd/yyyy Child (1) Child (2) Child (3) Child (4) Child (5) Child (6) Children's ii. initials Lived with Adult Name City State **Dates** From mm/dd/yyyy To mm/dd/yyyy Child (3) Child (6) Child (1) Child (2) Child (4) Child (5) iii. Children's initials Lived with Adult Name City State **Dates** From mm/dd/yyyy To mm/dd/yyyy Child (1) Child (2) Child (3) Child (4) Child (5) Child (6) Children's İ٧. initials Lived with Adult Name City State **Dates** To mm/dd/yyyy From mm/dd/yyyy Child (1) Child (2) Child (3) Child (4) Child (5) Child (6) Children's ٧. initials Lived with Adult Name City State **Dates**

☐ Check this box if you have attached a separate sheet listing additional children or addresses.

From mm/dd/yyyy

Note: If the children have been in Iowa for less than six months, the court may not be able to issue an order about custody or visitation. The rules are complicated, and you may need to talk to an attorney.

To mm/dd/yyyy

		lent's status	
			_
			formation
(1)	The	e information about Respondent's status is listed correctly in the Petition.	
(2)	The	e information about Respondent's status is not listed correctly. The correc	t information
		Respondent (you are Respondent) is in the military service. There are special rules that may prevent this custody and visitation case fromward if you are in the military. You should talk to an attorney.	om going
		Respondent is in prison or jail atinin	ate .
		If you are in prison or jail, you may be entitled to a "guardian ad litem," a usually an attorney, appointed to protect the interests of a parent in some of	
		e or no contact order	
			formation about
(1) 🗆			ctly in the
(2)			correctly. The
		There is neither a "protective order" nor a "no contact order" between Re (you) and Petitioner (the other parent).	espondent
		There is a "protective order" or a "no contact order" between Responder Petitioner.	t and
		If there is a "protective order" or a "no contact order," fill in the following inf	ormation:
	a.	County and state where the order came from:	<u> </u>
		County	State
	b.	Court case number:	
. 🗆 A	ll of	the information in section 3 in the Petition on other cases about the	children is
ab 	out you c) Ju	the children is not correct. The correct information is: wheck B, fill in the correct information below. wenile court	
	Check of If paragabout R (1)	Check one If paragraph about Respondent Check one If paragraph Protective Check one If paragraph Respondent Check A or All of corrective Check A or Some about If you of (1) July	If paragraph 2E of the Petition (form 401) is not correct, check (2) and provide the correct in about Respondent's status. (1)

	-F0IIII 41	15: Answer to Petition for Custody and Visitation, continued	
		☐ There is a juvenile court case. The correct information is: If you check b, fill in the following information:	
	i.	. County and state of the juvenile court case:	State
	ii	i. Court case number:	
		Check one	
		(a) Concurrent jurisdiction has been granted.	
		(b) Concurrent jurisdiction has not been granted.	
		Note: If the juvenile court has not given concurrent jurisdiction (perm child custody cannot be decided in this case. You should talk to an att	
		Custody order Check a or b.	
	a. [☐ There is no custody order.	
	b. [
	Į	f you check b, fill in the following information:	
	i.	County and state where the custody order came from: County	State
	ii.	. Court case number:	
		Child support order <i>Check</i> a <i>or</i> b.	
	a. [☐ There is no child support order.	
	b. [☐ There is a child support order.	
	Į,	f you check b, fill in the following information:	
	i.	. County and state where the child support order came from:	State
	ii	i. Court case number:	
	ii	ii. List the children the support case covers (initials only):	
041-	l#-		
Resp In add	ondent dition,	rmation t denies anything in the Petition that Respondent has not agreed is c Respondent provides the following information: All of the basic informati rt is on this form. Provide other information only if you need to explain something.	

5.	Respo	ondent's Request indent asks the court to: ick all that apply. The court will only consider items the to an attorney.	nat are checked	l. If you do not know what you want,
	A. 🗆	Decide custody and visitation.		
	B . □	Establish legal parent.		
	C . □	Order child support and medical support.		
	D. □	Order that Petitioner pay the court fees.		
	E . □	Order that Petitioner pay for Respondent's	attorney's fe	es
	F. 🗆	Other request:		
6.	Attorr	ney Help		
	A. B.	An attorney did not help me prepare or fill in An attorney helped me prepare or fill in this If you check B, you must fill in the following informat	paper.	
		Name of attorney or organization, if any		Attorney's PIN – Ask attorney
		Business address of attorney or organization	City	State ZIP code
		()	Attorney's er	nail address – optional
7.		ce Instructions ondent is filing in paper ne		
	A . □	Respondent will accept service of document or	ts at the atto	rney's address listed above;
	B. □	Respondent will accept service of document below.	s in this cas	e at the mailing address
		Continued on	next page	,

l,		_, certify that on		, 20
•			-	
I mailed or gave a co address:	opy of this Answer t	to the other party or the	other party's a	ttorney at th
Name of person to whom	ı I delivered or mailed i	it		
Party's or attorney's mo	ailing address	City	Sta	te ZIP co
Oath and Signatu	ire	have read this Answ	er and I certify	under nena
Oath and Signatu	ıre	_, have read this Answ	er, and I certify	under pena
of perjury and pursu in this Answer is true	ant to the laws of the	_, have read this Answ ne State of lowa that the		
Print your name of perjury and pursu	ant to the laws of the	ne State of lowa that the		

scan the form after signing it and then file electronically

Important Instructions for filing this form on next page.

Instructions for Rule 17.400—Form 415: Answer to Petition for Custody and Visitation

Do not file these instructions

Instructions for Filing an Answer to a Petition for Custody and Visitation

The Iowa Judicial Branch uses an electronic court system known as the eFile System. You must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- You must register to file electronically. For help, see the <u>eFile User Guide</u> and the instructions on the <u>eFile Instructions page</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when you file electronically.)
- Log in to the eFile System on the Iowa Judicial Branch website and file your Answer.
- The login page can be accessed from two different paths: you may <u>directly log in to eFile</u>; or from the judicial branch website menu, you may select "eFile Login."
- You will receive a Notice of Electronic Filing when the clerk of court has approved the filing of your Answer and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, you will receive a Notification of Electronic Filing in your eFile account. Log into My Filings, correct the error, and resubmit your filing. For help, see Resubmitting a Returned Filing.
- The Notice of Electronic Filing will indicate if the other parent is exempt from electronic filing
 requirements, in which case, you must mail or serve in paper a copy of the document on the other
 parent if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where the Petition was filed. The county is listed at the top of the Petition (form 401).
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on the other parent (Petitioner).
- You can hand one of the copies of the Answer form to the other parent, or mail a copy to the other
 parent at the address shown on the Petition.
- If the other parent has an attorney, you should serve the Answer by mailing a copy to the attorney
 at the attorney's address on the Petition if box 7A on the Petition is checked.

Do not file these instructions

Respondent: You must file an Answer in the county where the Petition was filed within 20 days after receiving the Petition and Original Notice, or the court may enter a judgment against you giving the Petitioner what he or she asked for in the Petition.

If the Petition you received is on form 401, use form 415 for your Answer.

Read the Guide to Representing Yourself in an Iowa Custody and Visitation Case (Parents not Married) on the Iowa Judicial Branch website before using this form.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (form 411).
- If filing in paper, you may use form 411 to provide any protected information in full.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the lowa District Court for Con	County unty where the Petition was filed
Jpor	the Petition of	Equity case no.
Petitioner The other parent's full name: first, middle, last		General Answer to a Petition for Custody and Visitation
and c	oncerning	
	oondent I name: first, middle, last	
	Respondent's Answer You are Respondent Respondent admits that the following para List the numbers of the paragraphs in the Petition to the paragraphs you list here are not true, it may be	graphs in the Petition are true: hat you think are true. If you decide later that
A.	Respondent admits that the following para List the numbers of the paragraphs in the Petition to	graphs in the Petition are true: hat you think are true. If you decide later that too late to change your answer.
A.	Respondent admits that the following para List the numbers of the paragraphs in the Petition to the paragraphs you list here are not true, it may be	graphs in the Petition are true: that you think are true. If you decide later that too late to change your answer. graphs in the Petition are true:

D. Children's living arrangements

Places where the children have lived during the last five years and the parent(s) or adult(s) who acted as parents:

		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(1)	Children's initials						
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm /	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(2)	Children's initials	Omia (1)	Omia (2)	Omia (o)	Omita (4)	Omia (o)	Omia (o)
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(3)	Children's initials	, ,	, ,	, ,	, ,	, ,	, ,
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
(4)	Children's initials	•	, ,	` `	, ,	, ,	`,
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		
		Child (1)	Child (2)	Child (3)	1111		Child (6)
(5)	Children's initials			- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Child (5)	J (6)
	Lived with		Adult Name		Ci	ty	State
	Dates	From mn	n/dd/yyyy	To mm/	/dd/yyyy		

 $\ \square$ Check this box if you have attached a separate sheet listing additional children.

Note: If the children have not lived in Iowa for six months, you might not be able to get custody. The rules are complicated and you may need to talk to an attorney.

E.	Protec	tive or no contact orders
	Check o	one
	(1)	There is neither a "protective order" nor a "no contact order" between Respondent (you) and Petitioner (the other parent).
	(2)	There is a "protective order" or "no contact order" between Respondent and Petitioner.
		If you check (2), fill in the following information:
		a. County and state where the order came from:
		County State
		b. Court case number:
F.	Other	cases about the children
	Check ((1) or (2)
	(1)	There are no other cases about the children. If you check (1) , skip to G .
	(2)	There are other cases about the children.
		e is an order from out of state about the children, an Iowa court may not be able to issue an about custody or visitation. The rules are complicated and you may need to talk to an ev.
		heck F(2), fill in the applicable information below.
	a. Ju	venile court
	Ch	eck i or ii.
	i.	☐ There is no juvenile court case.
	ii.	☐ There is a juvenile court case.
		If you check ii, fill in the following information:
		(a) County and state of the juvenile court case: County State
		•
		(b) Juvenile court case number:
		Check (i) or (ii)
		(i) Concurrent jurisdiction has been granted.
		(ii) Concurrent jurisdiction has not been granted.
		Note: If the juvenile court has not given concurrent jurisdiction (permission,) then child custody cannot be decided in this case. You should talk to an attorney.
		ustody order
		ou might not be able to get custody in Iowa if there is a custody order entered in another state. eck i or ii.
	i.	☐ There is no custody order.
	ii.	☐ There is a custody order. If you check ii, fill in the following information:
		(a) County and state where the custody order came from:
		County State
		(b) Court case number:

		C.			upport order		
			Ch	eck 1	or ii.		
			i.		There is no child support order.		
			ii.		There is a child support order.		
			Ify	ou cl	neck ii, fill in the following information:		
				(a)	County and state where the child support order came from:	County	State
				(b)	Court case number:	_	
	G.	Re	spo	nde	nt denies anything in the Petition that is not admit	ted in this Ans	swer.
	Н.	Ot	her	info	mation:		
	_						
	_						
2.	Re	sp	ond	lent	's Request If you do not know what you want, talk to	an attorney.	
	Re cou	spc ert w	nde hat y	nt a	sks the court to: Write here what you would like the cou ant for custody and visitation. Be brief. Do not write long a	rt to do. For exa descriptions.	mple, tell the

		ck o	ney Help							
			An attorney dic	l not holp n	ao propar	o or fill in th	nie nanor			
			•	•						
	٥.	П	An attorney he If you check B, yo		•		•			
			Name of attorney	or organizati	ion, if any			Attorney's PI	N-A	1sk attorney
			Business address	of attorney of	r organizat	ion	City	Sta	ate	ZIP code
			()_ Attorney 's phone	no. (ney's fax no	0. – optional		ail address – o	ptiona	ıl
5	Se	rvi	ce Instruction	ıs						
			pondent is filing	in paper						
		eck o		Il aggent ag	nios of d	la auma nta a	t the ottorna	uda addrasa	lioto	d above:
_			Respondent wi	-				-		
В	3.		Respondent wil	l accept sei	rvice of do	ocuments in	this case at	the mailing a	addr	ess below
						r Delivery				
S_{i}	ect	tion	5 to be completed of cument, if filed elec	nly if filing in	n paper or	if the other pa	rty is exempt fi		filin	g.
S_{t}	ect his	tion s doc	5 to be completed of cument, if filed elec	only if filing in tronically, wi	n paper or i Il automati	if the other pa cally be serve	rty is exempt fi d on registered	d parties.		
Se T	his P	tion s doc rint	5 to be completed of cument, if filed electronsy, your name	only if filing in tronically, wi	n paper or i Il automati	if the other pa cally be serve , certi	rty is exempt fid on registered fifty that on	d parties. Ionth	- <u>-</u>	, 20
Set Ti	his P	tion s doo rint aile	5 to be completed of cument, if filed electrons your name d or gave a cop	only if filing in tronically, wi	n paper or i Il automati	if the other pa cally be serve , certi	rty is exempt fid on registered fifty that on	d parties. Ionth	- <u>-</u>	, 20
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Instructions for Rule 17.400—Form 416: General Answer to a Petition for Custody and Visitation

Instructions for Filing an Answer to a Petition for Custody and Visitation

The Iowa Judicial Branch uses an electronic filing court system known as the eFile System. You must file electronically unless you get permission from the court to file in paper. Contact the clerk of court in your county if you are unable to file electronically.

Filing your Answer electronically

- You must register to file electronically. For help, see the <u>eFile User Guide</u> and the instructions on the <u>eFile Instructions page</u> on the Iowa Judicial Branch website.
- Scan the signed Answer form and save it as a .pdf. (Save it in a place that will be accessible to you when
 you file electronically.)
- Log in to the eFile System on the Iowa Judicial Branch website and file your Answer.
 The login page can be accessed from two different paths: you may <u>directly log in to eFile</u>; or from the judicial branch website menu, you may select "eFile Login."
- You will receive a Notice of Electronic Filing when the clerk of court has approved the filing of your Answer
 and other documents. You can then open the Answer and print a copy for your records.
- If there was a problem with your filing, you will receive a Notification of Electronic Filing in your eFile
 account. Log into My Filings, correct the error, and resubmit your filing. For help, see <u>Resubmitting a</u>
 <u>Returned Filing</u>.
- The Notice of Electronic Filing will indicate if the other parent is exempt from electronic filing requirements, in which case, you must mail or serve in paper a copy of the document on the other parent if he or she does not have an attorney.

Filing your Answer in paper

- Make two photocopies of the original.
- Take your original Answer form and the photocopies to the clerk of court's office in the county where
 the Petition was filed. The county is listed at the top of the Petition.
- The clerk will time-stamp your forms and copies.
- The clerk will take the original and give the copies back to you.
- Keep one of the copies for your records.
- Serve one of the copies of your Answer on the other parent (Petitioner).
- You can hand one of the copies of the Answer form to the other parent, or mail a copy to the other parent at the address shown on the Petition.
- If the other parent has an attorney, you may serve the Petition by mailing a copy to the attorney at the attorney's address.

Do not file these instructions

August 2019

Instructions for Rule 17.400—Form 416

Page 1 of 1

[Court Order July 19, 2019, effective September 1, 2019]

Rule 17.400—Form 421: Affidavit for Temporary Custody and Visitation

Form 421 is for either party to tell the court about custody and visitation before the case is finished, or to have a witness tell the court about custody and visitation before the case is finished.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the lowa District Court for	unty where the case is filed
Upon	the Petition of	Equity case no. Affidavit for Temporary Custody and
Petitio Full name	PNET as it appears on the Petition: first, middle, last	Visitation
and co	ncerning	
Respor	ndent as it appears on the Petition: first, middle, last	
1. St	atement	
A.	My name is Full name of witness: first, middle, last	
	ruu name oj wuness: jirsi, miaaie, iasi	
B.	My relationship to	r; or initials of child (Do not use child's full name.)
	-	
	is:	
	I understand that a judge may consider this visitation of the children in this case. If I we Attach additional pages if necessary.	s Affidavit to determine temporary custody and ere present in court, I would testify as follows:
	Check here if there are additional pages attached.	ed.
	Continued	l on next page

Rule 17.400—Form 421: Affidavit for Temporary Custody and Visitation, continued

B.		An attorney he If you check B, y							
		Name of attorne	y or organizati	on, if any		Attorney's	s PIN –	Ask the	attorney
		Business addres.	s of attorney or	r organizati	ion (City		State	ZIP cod
			,	,					
		Attorney's phone	e no Attori	ov's far na	- optional Atto	rnev's email ado	dross_o	ntional	
		()_ Attorney's phone	e no. Attori	ney's fax no	. – optional Atto	rney's email add	dress – o	ptional	
Oa	ath a				. – optional Atto	rney's email add	dress – o	ptional	
Oa		and Signatui	re of Witne	ss					
l,		and Signatui	re of Witne	ess	certify under pe	enalty of perjur	y and	pursua	nt to the
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I, law in t Sign	ws of this A gned o	the State of loafidavit is true and Month	wa that I have and correct.	re read thi	certify under pe is Affidavit and Your signat	enalty of perjur that the inform ure*	y and nation	pursua I have I	orovideo

 $\bullet \ \ \textit{If the witness is either Petitioner or Respondent in this case, attach the \textit{Affidavit to your Motion (form 422)}. \\$

Rule 17.400-Form 422: Motion in a Custody and Visitation Case

Use this form if you want to ask the court to do something after your court case has already started.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court fo	County where your case is filed County
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Motion in a Custody and Visitation Case
and concerning	
Respondent Full name: first, middle, last	
l am Check one	
A. PetitionerB. Respondent	
 (1) Change the hearing date that has (2) Order temporary custody and visit (3) Order temporary child support and (4) Set a hearing date for a Custody and (5) Award me attorney's fees before 	Month Day Year tation. d medical support. and Visitation Order by default.
B. I am making the request(s) in this Mot	ion because:

Rule 17.400—Form 422: Motion in a Custody and Visitation Case, continued

	Attorney Help Check one									
A. An attorney did not help me prepare or fill in this paper.										
В. 🗆] An attorney he									
	Name of attorney	v or organizati	ion, if any		Attorney's Pl	N – Ask th	e attorney			
	Business address	s of attorney or	r organization	City	v	State	ZIP cod			
	() Attorney's phone	()	44						
I,	ocument, if filed ele	-			-	- D	, 20 <u> </u>			
					natla	Dav	Year			
	led or gave a co					•	ey at this			
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Rule 17.400—Form 423: Response to a Motion in a Custody and Visitation Case

Use this form if the other parent has filed a Motion (most likely form 422) and you disagree with what the other parent is asking the court to do in that Motion.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the lowa District Court for_	County where your case is filed
Upon the Petition of	Equity case no.
Petitioner Full name: first, middle, last	Response to a Motion in a Custody and Visitation Case
and concerning	
Respondent Full name: first, middle, last	
I am Check one A. Petitioner B. Respondent	
1. Motion	
The other party filed a Motion on	, 20
2. Response Check A or B.	Day Year
A. 🔲 I agree with the Motion.	
B. I disagree with the request(s) in the If you check B, check all of the following that in C why you disagree with the request.	Motion to: t apply. If you check any box in B, you must tell the court
(1) Change the hearing date that ha	s been set for, 20
(2) Order temporary custody and vis	Month Day Year
(3) Order temporary child support at	
(4) Set a hearing date for a custody	• •
(5) Award attorney's fees before the	custody and visitation case is final.

Rule 17.400—Form 423: Response to a Motion in a Custody and Visitation Case, continued

(6	6)		Order genetic testing to decide paternity and require that Petitioner, Respondent, and child appear for testing.
(7)		Other request Explain
C.	l di	sag	ree with the Motion because:
	_		
	_		

Rule 17.400—Form 423: Response to a Motion in a Custody and Visitation Case, continued

3.	Attori Check o	ney Help one						
	A. 🗆	An attorney did not	t help me prepa	are or fill in thi	s paper.			
	B. □	An attorney helped If you check B, you mu						
		Name of attorney or or	rganization, if any	,	Attorn	ey's PIN – A	sk the attorn	ey
		Business address of at	torney or organiz	ation	City		State ZIP o	ode
		() Attorney's phone no.	_ ()_ Attorney's for	no ortional 4	ttornev's email	address - opti	onal	
		Auorney's prione no.	Automey s jus	. no. – optonai – A	nomey seman	uuuress – opu	oncu	
4.	Section This do	ication of Service 3 to be completed only i cument, if filed electroni	f filing in paper o cally, will automa	r if the other part utically be served	on registered p	arties.		
	I,	Print your name		, certify that o	n		, 20	
		<i>'rint your name</i> ed or gave a copy of				-		
	addre	ss: f person to whom I deliv	ered or mailed it					
	Party's	or attorney's mailing a	ddress	City		Sta	ite ZIP co	ode
5.		and Signature						
	l,	your name		₋ , certify under	penalty of p	erjury and	pursuant to	o the
	laws o	f the State of lowa t ed in this Motion is t	hat I have read	d this Motion a	nd that the ir	nformation		
	Signed	on: Month	, 20	Your sign	natura*			
		Monin	Day Tear	Tour sign	lature			
	Mailing	address		City		State	ZIP code	_
	<u></u>				4.17::	1 11		
	rnone i	umoer	Email addre	22	Addition	al email addr	ess — ij avaii	шые
*		filing electronically or in form after signing it and t			ture on this form.	If you are fili	ng electronica	dly,

Rule 17.400—Form 424: Custody and Visitation Financial Statement

*How often is income paid?

Caution: This form may require you to provide protected or sensitive information. Each party must complete one of these forms.

- 🚨 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure (form 411) if you have not already done so.
- f filing in paper, you may use form 411 to provide any protected information in full if you have not already done so.

In the Iowa District Court for_	County where the case is filed
Upon the Petition of Petitioner first, middle, last Full name of Petitioner and concerning Respondent first, middle, last Full name of Respondent	Equity case no. Custody and Visitation Financial Statement of Check one Petitioner Respondent
am Check one A. Petitioner B. Respondent I,	state that this is a true and complete statement ome as of the ${Day}$ day of ${Month}$, 20 ${Year}$

Gross income Net income A. Current income from employment and other sources Gross How often?* How often?* **Net amount** Sources of income, not required to list name of amount W,B,M,TW,B,M,TAfter taxes employerBefore taxes (1) Wages from employer Job: \$ \$ Title: (2) Wages from employer Job: \$ \$ Title: (3) Other income \$ \$ Describe source:

W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month

Rule 17.400—Form 424: Custody and Visitation Financial Statement, continued

Total income for you from employment and other sources	Total gross income	\$ Total net income	\$
(5) Other income Describe source:		\$	\$
(4) Other income Describe source:		\$	\$

B. Deductions allowed for child support calculations			
Tax status			
I have custody of the children in this case Check Yes or No	☐ Yes	s 🗌 No	
(1) Number of exemptions Yourself Guidelines allow one exemption for parent	1		
Children			
(2) Income tax withheld Federal		\$	
State		\$	
(3) FICA Social Security & Medicare		\$	
(4) Mandatory pension contribution			
(5) Mandatory occupational license fees		\$	
(6) Union dues		\$	
(7) Prior court-ordered child support Paid to:		\$	
Paid to:		\$	
Paid to:		\$	
(8) Prior court-ordered medical support Paid to:		\$	
Paid to:		\$	
Paid to:		\$	
(9) Prior court-ordered spousal support (alimony) Paid to:		\$	
(10) Actual child care expenses due to employment custodial parent	only	\$	
Total deductions		\$	

Check this box if you have attached a sheet with additional information on your income and deductions.

Rule 17.400-Form 424: Custody and Visitation Financial Statement, continued

2. Social Security Disability (SSD):										
	Α.	SS	D b	enefits paid to you						
		(1)	Ar	nount paid for your expen	ses		\$		pe	er month
	(2) Benefit paid for each child in your hon			ne	\$	\$ per r				
			a.	Number of children recei	iving bene	fits		children		
	b. List the children in your home who receive S			SSD bene	fits Use i	nitials only	,			
					Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
				First, middle, & last initials						
				Birth year						
	B.			Check this box if you hav and receive Social Securions ts paid to other person chefit paid for each child in	ity Disability ildren are	v (SSD). living with	1		ho live in yo	
		(2)	Nu	mber of children receiving	g benefits			chi	ldren	
		(3)		t the children who receive initials only:	SSD ben	efits but l	ive with so	omeone o	ther than	you.
			,		Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
				First, middle, & last initials						
				Birth year						
				Check this box if you hav and receive Social Securi			g additiona	l children w	ho live in yo	our home

Rule 17.400-Form 424: Custody and Visitation Financial Statement, continued

3. Qualified Additional Dependent Deduction

- List the initials and birth year of each child you are the legal parent of.
- Do not include any children covered by the child support order involved in this case.

	Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)	
First, middle, & last initials							
Birth year							
Check this box if you have attached a sheet listing additional children for the qualified additional dependent deduction.							
4. Extraordinary Visitation For nor	acustodial pa	rent only					
	(1) Number of court-ordered overnights in a year If this number exceeds 127 days per year, provide a copy of the court order containing the visitatio provisions.						
(2) Physical care Check one							
a. The court ordered equally shared physical care for the children.							
If the court ordered equally shared physical care for the children, the extraordinary visitation credit does not apply.					y		
b. The court did not ord	er equally s	hared phys	sical care f	or the child	lren.		

Rule 17.400—Form 424: Custody and Visitation Financial Statement, continued

5. My expenses

List your living expenses

*How often paid?: $W = Weekly \ B = Bi$ -weekly (every other week) M = Monthly T = Two times a month A = Annually

Type of expense	Paid to	How often paid?* W,B,M,T,A	Monthly payment
(1) House payment or rent			\$
(2) Food At home & restaurants			\$
(3) Transportation (gas, bus fare) Not car loan payments – see (12).			\$
(4) Clothing			\$
(5) Medical, dental Not health insurance payments— see (10).			\$
(6) Utilities (gas, electric)			\$
(7) Phone			\$
(8) Cable / satellite television / internet			\$
(9) Car insurance payment			\$
(10) Health insurance payment			\$
(11) Credit card payments			\$
(12) Car loan payments			\$
(13) Other loan payments			\$
(14) Other expense Identify:			\$
(15) Other expense Identify:			\$
(16) Other expense Identify:			\$
(17) Totals from attached sheets, if any Check this box if you have attached a sheet	\$		
Total expenses			\$

Rule 17.400-Form 424: Custody and Visitation Financial Statement, continued

6. My debts Debts may include things such as past due balances on utilities, money owed to a landlord for damages after moving, credit card debt, and loans from friends, family, or banks.

*How often paid? W = Weekly B = Bi-weekly (every other week) M = Monthly T = Two times a month A = Annually

Payable to	Item or service	Amount	How often paid?* W,B,M,T,A	Balance due
Α.				\$
В.				\$
C.				\$
D.				\$
E. Totals from attached sheets, if any Check this box if you have attached a stacked as the total.	\$			
Total debts				\$

7. The other parent's income

- List the other parent's information to the best of your ability.
- This information will not be used to determine child support obligations.

*How often is income received?

 $W = Weekly \ B = Bi$ -weekly (every other week) $M = Monthly \ T = Two times a month$

A. Current income from employment and	Gross ir	ncome	Net income	
other sources Sources of income, not required to list name of employer	How often?* W,B,M,T	Gross amount Before taxes	How often?* W,B,M,T	Net amount After taxes
(1) Wages from employer Job: Title:		\$		\$
(2) Wages from employer Job: Title:		\$		\$
(3) Other income Describe source:		\$		\$
(4) Other income Describe source:		\$		\$
Total income for other parent from employment and other sources	Total gross income	\$	Total net income	\$

8.

Attorney Help

Rule 17.400—Form 424: Custody and Visitation Financial Statement, continued

	Check	one				
	A .□	An attorney did ı	not help me prepar	e or fill in this	s paper.	
	В.□	An attorney help	ed me prepare or t	fill in this pap	er.	
		If you check B, you mus	st fill in the following info	ormation:		
		Name of attorney or o	organization, if any		Attorney's PIN —	Ask the Attorney
		D : 11 C				g, , 710 1
		Business address of a	ttorney or organization	City	,	State ZIP code
		()	() Attorney's fax no. –		au'a amail a dduaaa	
		Allorney's phone no.	Auorney s jax no. –	optional AllOffic	ty s eman adaress – op	Honai
_						
9.			e by Mailing or D if filing in paper or if the		comnt from electronic	
		=	lectronically, will autom			
						00
	I,	rint vour name	, cei	Tify that on <i>Mon</i>	th Day	, 20 Year
		-	of this Motion to t		•	
		is address:	,	•	,	, ,
	Name	of person to whom I deli	ivered or mailed it			
	Ivanic	oj person to wnom i den	vereu or muneu n			
	Party'	's or attorney's mailing o	address	City		tate ZIP code
10.	Oath	and Signature				
	I,		, сег	tify under pe	nalty of perjury a	and pursuant
		your name	e of lowa that I hav	e read this M	lotion and that th	36
			ided in this Motion			
		t this Motion.				
	Signed	d on:	, 20			
	Ü	Month	Day Year	Your signature	*	
	Mailin	ng address	City		State	ZIP code
	1)				
	Phone	number	Email address		Additional email add	dress – if available
_						
*			a paper, you must handwrite signing it and then file ele	-	ı this form. If you are fi	ling
Augu	st 2019		Rule 17.400—I	Form 424		Page 7 of 7

Rule 17.400—Form 425: Affidavit of Mailing Notice

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa District Court for_	County where the Case is filed
Upon the Petition of	Equity case no.
Petitioner Full name of Petitioner as it is in the original case	Affidavit of Mailing Notice
and concerning	
Respondent Full name of Respondent as it is on the Application	
 Attorney Help Check one A.	in this paper. information: Attorney's PIN – Ask the attorney
()	no. – optional Attorney's email address – optional

Important Notice

A party **must** file this Affidavit with the clerk of court if he or she asks the court for a default Order for Custody and Visitation. The party **must** also complete the oath and signature section on the next page.

Oath and Signature on next page

Rule 17.400—Form 425: Affidavit of Mailing Notice, continued

Oath and Signature				
Print your name	, certify under penalty	of perjury and	d purs	suant to th
laws of the State of lowa that on the	day of	, 20, I	sent k	y ordinaı
mail with proper postage, the following p	,	1eur		
☐ Notice of Intent to File a Written App	lication for Default Orde	r for Custody a	nd Vis	itation or
Other document (describe):		-		
to the other party's last-known address				
Other party's street address	City	S	State	ZIP code
Signed on:, 20				
Month Day Year	Applicant's signature*	•		
ivioriai Day Ivai				
Mailing address	City	<u></u> 5	State	ZIP code
	City	<i>S</i>	State	ZIP code

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically,

scan the form after signing it and then file electronically.

Rule 17.400—Form 426: Notice of Intent to File Written Application for Default Decree

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

In the Iowa I	District Court for	County where your case is file	$\frac{}{d}$ County				
Upon the Petition of		Equity case no.					
Petitioner Full name of Petitioner as it is in the or	iginal case	Notice of Intent to File Written Application for Default Decree					
and concerning							
Respondent Full name of Respondent as it is on the	Petition						
To party receiving this	Notice:						
First name	Middle name	Last name					
Date of Notice:		20					
_	and you may lose importar	er for Custody and Visitation vot rights. You should seek le	gal advice at once.				
or attorney if filing in paper	,	or attorney if filing elec					
The person who provided the si	gnature above must fill in	the information below.					
Present street address (If a	ttorney, firm address)	City	State ZIP code				
() Phone number	 Email addr	ress					
Instructions for party filing							
Filing your Notice of	electronically						
EDMS will automatica filing requirements.	lly serve the party receiving	g this Notice unless that party	y is exempt from electronic				
Filing your Notice i	n paper (if you have rece	ived permission from the cou	rt to file in paper)				
Complete form 425	and file the original at the this form (426) at the clerk		person.				
August 2010	Pulo 17 400	. F 420	Dogo 1 of 1				

Rule 17.400—Form 427: Request for Relief in a Custody and Visitation Case

Use this form only if you have filed a Petition for Custody and Visitation (form 401) and:

- The other parent (Respondent) did not file an Answer, or
- The other parent will not work with you to prepare a Settlement Agreement (form 428).

Caution: This form may require you to provide protected or sensitive information.

- If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (411) if you have not already done so.
- If filing in paper, you may use form 411 to provide any protected information in full if you have not already done so.

In the lowa District Court fo	r	Cou s filed	inty		
Upon the Petition of	Equity case no				
Petitioner Full name: first, middle, last and concerning Respondent Full name: first, middle, last	Request for Relief in a Custody and Visitation Case Check one Petitioner Respondent				
Check A or B and fill in C and D.					
 A. Petitioner B. Respondent C. Petitioner's birth year and present residence 	ee: <u>Birth year</u>				
B. ☐ Respondent		State	ZIP code		
B. Respondent C. Petitioner's birth year and present residence	Email address	State	ZIP code		
B. Respondent C. Petitioner's birth year and present residence Petitioner's present street address (Birth year City Email address ence:	State State	ZIP code		

2. Request for Relief

Rule 17.400—Form 427: Request for Relief in a Custody and Visitation Case, continued

A.	Childr	en Check all that are true											
	(1)	Petitioner and Responder Parenting Plan (form 429 Relief.	nt agree to the c). <i>A parenting plan</i>	us m	stody and visitation set ou nust be provided to the court wi	It in the Agreed th the Request for							
	(2)	Petitioner and Respond I filed a Proposed Parer	Petitioner and Respondent do not agree about custody and visitation. I filed a Proposed Parenting Plan (form 430). A parenting plan must be provided to the court with the Request for Relief.										
	(3)		Petitioner and Respondent agree that they are the parents of the following children.										
		First, middle, & last initials of each child	Birth year		First, middle, & last initials of each child	Birth year							
		(1)			(4)								
		(2)			(5)								
		(3)			(6)								
		☐ Check this box if you are	e attaching a separ	at	e sheet listing additional chi	ldren.							
	(4)	Petitioner and Respond children. Check this box if there is a different character.	_			_							
		First, middle, & last initials of each child	Birth year		First, middle, & last initials of each child	Birth year							
		(1)			(4)								
		(2)			(5)								
		(3)			(6)								
		☐ Check this box if you are	e attaching a separ	at	e sheet listing additional chi	ldren.							
		Explain who are the pa			•								
	(E) [Detitioner has taken the	ahildran in tha	_	iddle equipe (111 T								
	(5) L (6) L	Petitioner has taken the Respondent has taken t											
R	` '	cial affidavits Check one	ine children in ti	10	middle course. Auden c	erigicale							
Β.	(1)	I filed a Financial Affida	vit (form 424)	١٠	certify that I have fully di	isclosed all							
	(., ⊔	income and the identity											
	(2)	I am asking that the cou	rt not require m	e	to file a Financial Affida	avit because:							
ber	2020		Rule 17.400—Form 4	27	,	Page 2 of 6							

 $Rule\ 17.400 - Form\ 427: \textit{Request for Relief in a Custody and Visitation Case}, continued$

(2)	Petitioner will pay child s Petitioner will pay child s		ondent in the amount of \$ I party in the amount of \$		
	Third party's full name: first,	middle, last			
	Present street address		City	State	ZIP code
	County				
(3)	Respondent will pay chil	d support to Pe	titioner in the amount of \$	<u> </u>	_ per mont
(4)	Respondent will pay chi	d support to a th	nird party in the amount o	f \$	_ per mont
	Third party's full name: first,	middle last			
	Trura party s jun name: jirsi,	таак, шы			
	Present street address		City	State	ZIP code
	County				
(5)	•	s will begin on t	heday of		, 20
()	for the following childre	•	Month		Year
	First, middle, & last initials of each child	Birth year	First, middle, & last initials of each child	Birt	h year
	(1)		(4)		
	(2)		(5)		
	(3)		(6)		
	1				I

 $Rule\ 17.400 \\ --Form\ 427: \textit{Request for Relief in a Custody and Visitation Case}, continued$

Ε.	exem	

nitials of	Birth year	Parent who should now claim child for tax deduction	Every Year	Even Years	Odd Years
	Birth year Child for tax deduction Year Years Year Years Year Year Years Year Year Year Year Year Year Year Year				
re expensourt to s Responde	ses et the health car nt will provide med will pay the first medical expense then uncovered	lical support (health insurance). \$of es for the children. After that al medical expenses will be paid	uncover mount is	red spent,	
	% by	Petitioner and% by	Respon	dent.	
	will pay cash me	edical support in the amount of	\$	per	month.
s					
	eck this be eduction The parene ededuction re expension expension to see the court to see t	reck this box if you are attachined action will start in tax you are attachined action. Tax forms are a street income tax credit is not received action. Tax forms are a street income tax credit is not received. will provide med will provide med will pay the first medical expensithen uncovered % by will pay cash medical expensition wi	Parent who should now claim child for tax deduction Parent who should now claim child for tax deduction	Birth year Child for tax deduction Year Year Child for tax deduction Year Child for tax deduction Year Child for tax deduction	Birth year Parent wind should how claim Every Year
Rule 17.400—Form 427: Request for Relief in a Custody and Visitation Case, continued

	Н.	Attorney's fees Check one
		(1) I have no attorney's fees.
		(2) U will pay my own attorney's fees.
		(3) I ask that my spouse pay me \$for attorney's fees.
	I.	Necessary documents
		I ask that the court require each of us to sign and deliver to each other any papers that may be needed to carry out the terms of the Custody and Visitation case.
	J.	Other request for relief
		☐ Check this box if you have attached a separate sheet listing additional requests for relief.
3.		atements of Understanding and Fact eck all that apply
	A.	☐ I have made a full disclosure of my property and debts to the court.
	B.	☐ This request for relief addresses all issues in my Custody and Visitation case.
	C.	☐ I want the court to approve this request for relief and make it part of the final order.

4. Attorney Help

Rule 17.400—Form 427: Request for Relief in a Custody and Visitation Case, continued

Check	one						
A . □	An attorney did not	help me prepare	or fill in this	paper.			
В. 🗆	An attorney helped			∍r.			
	If you check B, you mu	st fill in the following	g information:				
	Name of attorney or or	ganization, if any		Attorne	y's PIN –	- Ask the	Attorney
	Business address of att	orney or organizatio	on	City		State	ZIP co
	() Attorney 's phone no.	()_ Attorney's fax no	0. – optional At	torney's email (address – a	optional	
Section	fication of Service 1 5 to be completed only ij This document, if filed ele	filing in paper or if ectronically, will aut	the other party omatically be s	served on registe			
I,	rint your name	, c	ertify that or	1		,	20
	rint your name led or gave a copy of				•		Year
Party's	s or attorney's mailing ac	ldross	— City			State State	ZIP cod
							211 000
Jain	and Signature	, c	ortify under	nonalty of no	vrium, an	d nure	uant
Print 3	your name	, ·	ertily under	penalty of pe	ijuly ali	u puis	uanı
	e laws of the State of ded in this Motion is t						n I hav
Signed	! on:	<u>Day</u> , 20 <u>Year</u>	Your sign				
	Month	Day Year	Your sign	ıture*			
Mailin	g address	Ci	ity		State	ZIP	code
	_)	_		_			
Pnone	number	Email address		Additiona	il email ac	iaress –	if available
	r filing electronically or in p nically, scan the form after s			re on this form.	If you are	filing	

Use this form only if you and the other parent both agree to the terms of a Settlement Agreement.

Caution: This form may require you to provide protected or sensitive information.

- 🗕 If filing electronically and you include protected information on this form, fill out or update the Protected Information Disclosure form (411) if you have not already done so.
- If filing in paper, you may use form 411 to provide any protected information in full.

in the level Block of	ourt for ${Coi}$	County where your case is filed Equity case no. Settlement Agreement for Custody and Visitation				
Jpon the Petition of						
Petitioner Full name: first, middle, last						
and concerning						
Respondent Full name: first, middle, last						
	Petitioner's birth year and present reside		State	ZIP code		
Petitioner's present street addre	ess	City	State	ZIP code		
(ess) ne number	City Email address	State	ZIP code		
(.) ne number	Email address	State	ZIP code		
County Phon) e number ad present i	Email address	State	ZIP code		
County Phon B. Respondent's birth year an Respondent's present street add) e number ad present i	Email address residence: Birth year				

2. A	gree	me	nts								
W	e ag	ree	to the following	:							
A.	Ch	ildre	en Check all that	are true							
	(1)		We agree to the	custody and	visitation set	out in the Agr	eed Parentin	g Plan (form 4	429).		
	(2)		(430). A parenti	le do not agree about custody and visitation. We each filed a Proposed Parenting Plan (430). A parenting plan, either form 429 or form 430, must be provided to the court with the ettlement Agreement.							
	(3)			We agree that we are the parents of the following children: Note: If you do not agree regarding who are the legal parents of the children, do not use this form. Use form 427.							
				Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)		
			, & last initials								
Birtl	ı yea	ır									
B.	(5) Fin (1)		fully dis	s taken the conect one spondent ha check each the er has filed a closed all incondent has file y disclosed a	s filed a Fina at is applicabl a Financial A come and the d a Financia Ill income an	e middle cour ncial Affidav e. ffidavit. Petit e identity and l Affidavit. Red d the identity	se. Attach ce it (424). ioner certifies amount of a espondent ce and amount	s that Petition Il expenses a ertifies that R of all expens	and debts. espondent		

C.	Note: Th	Support Check and a mount of child subservice provides a ch	ipport is determi	ned using the lo				tment of
	(1)	Petitioner will	pay child supp	port to Respo	ndent in the a	amount of \$ _	pe	er month.
	(2)	Petitioner will	pay child supp	port to a third	party in the a	mount of \$ _	per	r month.
		Third party's ful	ll name: first, n	niddle, last		_		
		Present street a	address		\overline{C}	ity	State	ZIP code
		County						
	(3)	Respondent wi	ill pay child s	upport to Peti	tioner in the a	mount of \$		_ per
	(4)	Respondent w month.	ill pay child s	upport to a th	ird party in th	e amount of S	\$	_ per
		Third party's ful	ll name: first, n	niddle, last				
		Present street a	uddress		\overline{C}	ity	State	ZIP code
		County						
	(5)	Child support	payments w	ill begin on th	neday of	Month	, 20)
		for the followi	ng children:			Monin		1 ear
			Child (1)	Child (2)	Child (3)	Child (4)	Child (5)	Child (6)
First,	middle	, & last Initials						
Birth	year							
		Check this box if	you have attac	ched a separat	e sheet listing	additional chi	ldren.	
	(6)	Check here if you Guidelines amo			_			
		a. Amount req	uested:\$	per	month			
		b. Child suppo	ort should be	different fron	n the Guideli	nes amount l	because:	
			C	4:				

_	_			
D.	Tax	$\Delta V \Delta$	mn	tınn
D .	1 4 1	-		LIOII

(1) We ask the court to set the tax deduction as: Check one for each child

		Child		, middle, & st initials	Birth year	Parent who sh claim child for ta		Every year	Even years	Odd year
		(1)								
		(2)								
		(3)								
		(4)								
		(5)								
		(6)								
		Tax forms	s are avail	lable from the IR e tax credit is not will start in tax	S website: http:/ the same as the	e tax exemption.	·			
E.	Hea	alth car	е ехреі	nses						
	Petit		Respond	lent		xpenses as follo port (health insura		ıll that ap _l	ply	
	(2)			the children. will be paid	After that a	c mount is spent, th	en uncovere	d medica		
		_				ner and				
	(3)			will pay cash	n medical sup	pport in the amou	nt of \$		_ per mo	onth.
F.	Chec We (1) (2) (3)	☐ Res	at itioner v sponder itioner a		court fees. ent will each	pay one-half of th pay one-half of th	-		S .	
	(-1)	_		and reoponde	Jile Will Caoll	pay one nament	c total obuit i	000.		

G.	Attorney's fees								
	(1) Petitioner's attorney's fees								
	Check one								
	a. Petitioner has no attorney's fees.								
	b. Petitioner will pay Petitioner's attorney's fees.								
	c. Respondent will pay \$ for Petitioner's attorney's fees.								
	(2) Respondent's attorney's fees Check one								
	a. Respondent has no attorney's fees.								
	b. Respondent will pay Respondent's attorney's fees.								
	c. Petitioner will pay \$ for Respondent's attorney's fees.								
	C. Tetitioner will pay \$ for Respondent's attorney's rees.								
Н.	Necessary documents								
	We will sign and promptly deliver to each other any papers that may be needed to carry out this								
	Settlement Agreement.								
I.	Other agreements								
	Attach additional sheets if necessary.								

3.				Help at apply							
	A.	Pe	Petitioner								
		(1)		An attorney did not he	elp me prepare or	fill in this p	oaper.				
		(2)		An attorney helped m	e prepare or fill in	this paper	г.				
				If you check (2), you mu	ist fill in the followi	ing informat	tion:				
			Name of attorney or organization, if any				Attorney's PIN – Ask the attorney				
		Business address of attorney or organization				City		State	ZIP code		
			(orney's phone number	() Attorney's fax no). – optional	Attorne	ey 's email addi	ress – opi	tional	
		(3)	(3) A mediator, Name of mediator					ຼ who is an a	ttorney,	helped me	
				prepare or fill in this p				party.			
	В.	Re	spo	ndent							
		(1)		An attorney did not he	elp me prepare or	fill in this p	oaper.				
				An attorney helped m If you check (2), you mu	e prepare or fill in	this paper	г.				
			Nai	me of attorney or organiz	cation, if any	Attorney'	's PIN – A	Ask the attorne	y		
			Bus	siness address of attorney	or organization	City		State	ZI	P code	
			(orney's phone number	() _ Attorney's fax	c number – o	pptional	Attorney's e	mail add	dress – optional	
		(3)		A mediator,				_, who is an a	ttorney,	helped me	
				prepare or fill in this p	me as a	party.					

4. Oaths and Signatures

This Settlement Agreement addresses all issues in our Custody and Visitation case. We want the court to approve this Agreement and make it a part of the final order.

I,, certify under penalty of perjury and pursuant to the Print your name											
•	of Iowa that I ha	ave read this	Settlement Agreement and	d it accurately sta	ites how						
	I would like the court to address the issues in my custody and visitation case. I know I have the right to talk to an attorney about this Agreement. I am voluntarily signing this Agreement. I am										
asking that this Se court.	sking that this Settlement Agreement be presented to a judge for approval and filing with										
333.11		20									
Month	Day	, 20 <u> </u>	Petitioner's signature*								
Mailing address			City	State	ZIP code						
Phone number	Email ad	ldress	Additiona	ıl email address – if	i – if available						
* Whether filing electronically, scan Respondent's O	the form after si	igning it and t	hen file electronically.	i uus joini. 13 you	ar o granze						
electronically, scan Respondent's Oa	the form after si ath and Signa	igning it and t									
Respondent's Oal, Print your name	the form after si	ature , cer	hen file electronically.	y and pursuant to	the						
Respondent's Oal, Print your name laws of the State of I would like the co	the form after signal ath and Signal of lowa that I haurt to address the signal of the	ature, cer ave read this the issues in	tify under penalty of perjury Settlement Agreement and my custody and visitation	y and pursuant to d it accurately sta case. I know I ha	the ates how ave the						
Respondent's Oal, Print your name laws of the State of I would like the coright to talk to an a	ath and Signa of Iowa that I haurt to address tattorney about t	ature, cer ave read this the issues in this Agreeme	tify under penalty of perjun Settlement Agreement and my custody and visitation ent. I am voluntarily signing	y and pursuant to d it accurately sta case. I know I ha g this Agreement.	the ates how ave the I am						
Respondent's Oall, Print your name laws of the State of I would like the coright to talk to an aasking that this Se	ath and Signa of Iowa that I haurt to address tattorney about t	ature, cer ave read this the issues in this Agreeme	tify under penalty of perjury Settlement Agreement and my custody and visitation	y and pursuant to d it accurately sta case. I know I ha g this Agreement.	the ates how ave the I am						
Respondent's Oal, Print your name laws of the State of I would like the coright to talk to an a	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme ement be pre	tify under penalty of perjun Settlement Agreement and my custody and visitation ent. I am voluntarily signing	y and pursuant to d it accurately sta case. I know I ha g this Agreement.	the ates how ave the I am						
Respondent's On Print your name laws of the State of I would like the coright to talk to an asking that this Secourt.	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme ement be pre	tify under penalty of perjun Settlement Agreement and my custody and visitation ent. I am voluntarily signing sented to a judge for appro	y and pursuant to d it accurately sta case. I know I ha g this Agreement. oval and filing with	the ates how ave the I am						
Respondent's Oall, Print your name laws of the State of I would like the coright to talk to an aasking that this Se	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme	tify under penalty of perjun Settlement Agreement and my custody and visitation ent. I am voluntarily signing	y and pursuant to d it accurately sta case. I know I ha g this Agreement. oval and filing with	the ates how ave the I am						
Respondent's Oall, Print your name laws of the State of would like the coright to talk to an aasking that this Secourt. Month	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme ement be pre	tify under penalty of perjundance Settlement Agreement and my custody and visitation ent. I am voluntarily signing sented to a judge for approach	y and pursuant to d it accurately sta case. I know I ha g this Agreement oval and filing with	the ates how ave the I am In the						
Respondent's On Print your name laws of the State of I would like the coright to talk to an asking that this Secourt.	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme ement be pre	tify under penalty of perjun Settlement Agreement and my custody and visitation ent. I am voluntarily signing sented to a judge for appro	y and pursuant to d it accurately sta case. I know I ha g this Agreement oval and filing with	the ates how ave the I am						
Respondent's Oall, Print your name laws of the State of would like the coright to talk to an aasking that this Secourt. Month	ath and Signa of Iowa that I haurt to address that attorney about the	ature, cer ave read this the issues in this Agreeme ement be pre	tify under penalty of perjunctify under penalty of perjunctify under penalty of perjunctify settlement Agreement and my custody and visitation ent. I am voluntarily signing sented to a judge for approach to a judge for a j	y and pursuant to d it accurately sta case. I know I ha g this Agreement oval and filing with	the ates how ave the lam in the						

Rule 17.400—Form 429: Agreed Parenting Plan

Use this form if both parents agree to everything in the plan regarding child custody and visitation.

Do not use this form if you and the other parent do not agree to all child custody and visitation arrangements. Instead, use form 430 to present a Proposed Parenting Plan to the court for the child custody and visitation arrangements you want.

If you do not understand how to use this form, or if you should use this form, talk to an attorney.

	In the Iowa District Court for						are filing this Parenting Plan	_ County
Up	Upon the Petition of					Equi	ty case no	
Pe	titic	ner Fi	ull name: first, middle, last				Agreed Parentin	g Plan
an	d co	ncernin	g					
Re	spc	ondent	Full name: first, middle,	last				
1.	A.	The pa	on for the Court	plan.	ed bv. a	or whos	e legal parents are Petitioner	and Respondent.
		Child	First, middle, & last initials	Present age	<u> </u>	nder F	School	Grade
		(1)						
		(2)						
		(3)						
		(4)						
		(5)						
		(6)						
		☐ Che	ck this box if you are a	ttaching a s	heet lis	ting ad	ditional children.	
	C.	Informa	ation about the chil	dren				
	Check all that are true							
		(1)	The children listed in are Petitioner and R			hildren	born to, adopted by or wh	ose legal parents
		(2)					court case. If you check (2), d custody and visitation.	attach a copy of the

2. Plan

A. Read these definitions of legal custody and physical care:

- (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (3) Physical care means providing the main home for the child and taking care of the child.
- (4) Joint physical care means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.

	the main notice of the oring and taking out of the oring.
B.	Legal custody should be Check one
	(1) Joint legal custody to both parents
	(2) To Petitioner
	(3) To Respondent
	(4) To other person
_	
C.	Physical care should be
	Check one
	(1) To Petitioner If you check (1), use D for Respondent's visitation.
	(2) To Respondent If you check (2), use D for Petitioner's visitation.
	(3) Joint physical care to both parents If you check (3), use E to explain the joint physical care schedule.
	(4) To other person
	Full name of other person: first, middle, last
D.	Regular Visitation Schedule
	Use D only if one parent will have physical care. This is the schedule for the other parent to see the children.
	(1) Visitation for
	Check one
	a. Petitioner
	b. Respondent

			on permission , b, <i>or</i> c.
	a.		Visitation should not be allowed because:
	L		Visitation should be supprised because:
	b.		Visitation should be supervised because:
			The supervisor for visitation should be
	C.		Regular unsupervised visitation schedule as the parents agree:
		i. ii.	 Reasonable visitation as the parents agree. Mid-week visitation on these days: M Tu W Th F □ a.m. □ a.m. □ □ □ □ □ p.m. to □ p.m.
		iii.	☐ Every weekend ☐ a.m. ☐ a.m. ☐ a.m. From
		iv.	
		V.	Other Describe
		vi.	Visitation will start on
E.			ical care plan
	(1) H	ow P	both Petitioner and Respondent will have joint physical care etitioner and Respondent will make decisions about the children: For example, decisions of, medical care, religion, and other decisions parents make for their children.
	- -		

(2)	How the children's time will be divided between Petitioner and Respondent: Also use section F for holidays, school breaks, birthdays, and other issues.
(3)	How the children's expenses will be paid: For example, expenses such as clothes, activities, and school fees.
(4)	How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development):
(5)	Other issues:

F. Other Custody and Visitation Considerations

All parents should complete section F regardless of physical care plan.

(1) Detailed holiday schedule

This schedule tells on which holidays the children will be with either Petitioner or Respondent.

Note: You do not have to fill in everything. Any day that is left blank means the children will spend that day with the parent who already has the children on that day.

P = PetitionerR=Respondent Every year Even years Odd years Holiday Time Р Р Р R R □ a.m. New Year's Eve : □ p.m. □ a.m. New Year's Day □ p.m. □ a.m. Martin Luther King, Jr. Day □ p.m. □ a.m. President's Day : □ p.m. □ a.m. Memorial Day □ p.m. □ a.m. Independence Day July 4th : □ p.m. □ a.m. Labor Day : □ p.m. □ a.m. Veterans' Day November 11th : □ p.m. □ a.m. Thanksgiving Day : □ p.m. □ a.m. : Christmas Eve □ p.m. □ a.m. : Christmas Day □ p.m. □ a.m. Mother's Day : □ p.m. □ a.m. Father's Day : □ p.m. □ a.m. : Petitioner's Birthday □ p.m. □ a.m. Respondent's Birthday : □ p.m. □ a.m. Halloween October 31st : □ p.m. Other: Describe □ a.m. □ p.m. Other: Describe □ a.m. : □ p.m.

(2)	Special rules for holidays Check one									
	a.		If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.							
	b.		If a holiday falls on a Monday or a Friday, the alternating weekend schedule in 2.D(2)c.iv will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row.							
	C.		The parents will cooperate and rearrange the alternate weekend schedule so that neither parent will have the children more weekends in a row without contact with the other parent.							
	d.		Other Explain							
(3)	Su	mm	er							
	Che	eck o	ne							
	a.		Summer school vacation will be divided as Petitioner and Respondent agree.							
	b.		Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts. If a joint physical care arrangement exists, the parents will return to that joint physical care arrangement at least one week before school starts.							
	C.		The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.							
	d.		The joint physical care arrangement will continue unchanged.							
	e.		Other Explain							
(4)		nter eck o	school holiday ne							
	a.		Winter school holidays will be divided as Petitioner and Respondent agree.							
	b.		Petitioner and Respondent will each have one-half of the winter school holiday and alternate the first and second half each year.							
	C.		Other Explain							

(5)	Sp	ring	school break
	Ch	eck a	ll that apply.
	a.		Spring school break will be divided as Petitioner and Respondent agree.
	b.		Spring school break will be alternated every other year between Petitioner and Respondent.
	C.		Petitioner and Respondent will each have one-half of each spring school break.
	d.		Other Explain
(6)	Th	e ch	nildren's birthdays
	Ch	eck o	ne
	a.		Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
	b.		A child's birthday will be spent with the parent who has the child on that day.
	C.		Each child's birthday will be alternated from year to year between Petitioner and Respondent.
	d.		Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
	e.		Other Explain
(7)			up and drop off ill that apply
	a.		The parents will agree about pick up and drop off for each visit.
	b.		The parent starting that parent's time with the children will pick up the children at the other parent's residence.
	C.		Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following persons are permitted to help:
	d.		Other arrangements for visitation For example, Petitioner and Respondent will meet
			at a location between their residences. Explain

(8)	The parent without the children may contact the children by Check all that apply							
	a.		Calling the children					
		Che	eck one					
		İ.	☐ At reasonable hours					
		ii.	□ a.m. □ a.m. □ a.m. □ p.m. to □ p.m.					
		•••						
			Phone number ()					
	b.		Emailing the children at this address: <i>Email where children can be contacted</i>					
	C.		Other Explain					
(9)	Ch	ang	es to the schedule					
	Che	eck a	ll that apply					
	a.		The parties may agree to additional visitation or changes to the schedule.					
	b.		If one parent fails to arrive at the appointed time, then the other parent will wait for at least					
			minutes before cancelling the visit.					
	C.		No changes allowed except by a court order.					
	d.		Other Explain					
(10)		solv eck o	ring disagreements					
	Bef	fore	going to court to resolve disagreements, Petitioner and Respondent will					
	a.		Ask the following person to help them resolve disagreements:					
			Name Relationship to parties Phone number					
			Present street address City State ZIP code					
	b.		Go to mediation. Do not check if mediation will not work because of domestic violence					
			or an injunction.					

3. Attorney Help

Check all that apply

A. Petitioner								
	(1)] An attorney did not help me prepare or fill in this p						
	(2)	2) An attorney helped me prepare or fill in this paper.						
		If you check (2), you must fill in the following informat	tion:					
	\overline{N}	ame of attorney or organization, if any	Attor	rney's PIN – Ask the a	ttorney			
	\overline{B}	usiness address of attorney or organization	City	State	ZIP code			
	(A	Attorney's phone number () Attorney's fax no optional A		ey's email address – op	tional			
	(3)	,		, who is an attorney	helped me			
		Name of mediator prepare or fill in this paper, but did not represent r	me as a	party.				
B.	Resp	ondent						
	(1)	An attorney did not help me prepare or fill in this p	paper.					
	(2)	An attorney helped me prepare or fill in this paper If you check (2), you must fill in the following information						
	\overline{N}	ame of attorney or organization, if any	Attorney's PIN – Ask the attorney					
	\overline{B}	Business address of attorney or organization		State	ZIP code			
	(_ A	ttorney's phone number () Attorney's fax no. – optional	Attorney's email address – optional					
	(3)	A mediator, Name of mediator prepare or fill in this paper, but did not represent r		, who is an attorney	helped me			

4. Oaths and Signatures

This Agreed Parenting Plan addresses all custody and visitation issues in our custody and visitation case. We want the court to approve this Agreed Parenting Plan and make it a part of the final order.

A.	Petitioner's Oath and Signature I,, certify under penalty of perjury and pursuant to the Print Petitioner's name									
	laws of the State of	f lowa that I have read this Agreed Parenting Plan, and I agree with opt this Agreed Parenting Plan.								
	Month			Petitioner's si						
						State ZIP code				
	Mailing address			City						
	() Phone number	Email a	ıddress		Additional emo	nail address – if available				
B.	Respondent's Oath and Signature I,, certify under penalty of perjury and pursuant to the Print Respondent's name									
	laws of the State of ask the court to add	opt this Agre	ed Parenting	Plan.		gree with t	he Plan. I			
	Month	Day	_, 20 <u></u>	Respondent's	signature*					
	Mailing address			City		State	ZIP code			
	() Phone number	Email a	ıddress		Additional emo	ail address –	if available			
*	Whether filing electr	onically or in	nanar 1101 mil	st handwrite vour	ianatura on this	form If you	, ara filina			

* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.

Rule 17.400—Form 430: Proposed Parenting Plan

 $Use\ this\ form\ if\ you\ and\ the\ other\ parent\ do\ not\ agree\ to\ all\ child\ custody\ and\ visitation\ arrangements.$

Do not use this form if both parents agree to everything in this plan. Instead, use form 429 to tell the court what you both want your plan to be.

	ourt for _	County wh	here voi	u are filing this Parentin	County
Upon the Petition of				ity case no.	
				•	
Petitioner Full name: first, middle, lo	ast			Proposed Pa Check one	renung Flan
and concerning				☐ Petitioner	
				Respondent	
Respondent Full name: first, mid	ldle, last				
am					
Check one					
A. ☐ Petitioner B. ☐ Respondent					
I. Information for the Cou	urt				
A. Children List all children	born to or a	dopted b	y Petiti	oner and Respondent.	
A. Children List all children First, middle, & last initials of each child	Present age	Gen M		oner and Respondent.	Grade
First, middle, & last	Present	Gen	der		Grade
First, middle, & last initials of each child	Present	Gen M	der F		Grade
First, middle, & last initials of each child (1)	Present	Gen M	der F		Grade
First, middle, & last initials of each child (1) (2)	Present	Gene M	der F		Grade
First, middle, & last initials of each child (1) (2) (3)	Present	Gene M	der F		Grade
First, middle, & last initials of each child (1) (2) (3)	Present	Gene M	der F		Grade

C.	Specia	ll concerns about the children
	Check a	ll that are true
	(1)	Breastfeeding infant
	(2)	Child with a disability
	(3)	Other Explain
D.	Inform	ation about the parents
		ll that are true
	(1)	Petitioner receives public assistance, Title XIX, or FIP.
	(2)	Respondent receives public assistance, Title XIX, or FIP.
	(3)	Petitioner plans to move within the next year.
	(4)	Respondent plans to move within the next year.
	(5)	This is the Parenting Plan for before the move.
	(6)	This is the Parenting Plan for after the move.
E.	Specia	Il concerns about the parents
	Check a	ll that are true
	(1)	Petitioner has an alcohol or drug problem.
	(2)	Respondent has an alcohol or drug problem.
	(3)	Petitioner does not have a driver's license.
	(4)	Respondent does not have a driver's license.
	(5)	Petitioner's home environment is not suitable. Explain in 11
	(6)	Respondent's home environment is not suitable. Explain in 11
	(7)	Petitioner is in jail or a mental health institution. Explain in 11
	(8)	Respondent is in jail or a mental health institution. Explain in 11
	(9)	Petitioner is protected under a Domestic Abuse Protective Order. Explain in 11
	(10)	Respondent is protected under a Domestic Abuse Protective Order. Explain in 11
	(11)	Explain:

2. Plan

A. Read these definitions of legal custody and physical care:

- (1) Legal custody means a parent has legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (2) Joint legal custody means both parents have equal legal rights and responsibilities for the child. These include making decisions about medical care, education, extracurricular activities, and religious instruction.
- (3) Physical care means providing the main home for the child and taking care of the child.
- (4) Joint physical care means both parents have equal rights and responsibilities for providing the main home for the child and taking care of the child.

B.	Legal custody should be Check one
	(1) Joint legal custody to both parents
	(2) To Petitioner
	(3) To Respondent
	(4) To other person
	Full name of other person: first, middle, last
C.	Physical care should be
	Check one
	(1) \square To Petitioner If you check (1), use D for Respondent's visitation.
	(2) To Respondent If you check (2), use D for Petitioner's visitation.
	(3) Joint physical care to both parents If you check (3), use E to explain the joint physical care schedule.
	(4) To other person
	Full name of other person: first, middle, last

D. Regular Visitation Schedule

 $Use \ D$ only if one parent will have physical care. This is the visitation schedule for the other parent to see the children.

If the parents will have joint physical care, then skip this section and complete section E instead.

ıj u	ie po	ireru:	witt nave Joint physical care, then skip this section and complete section E trislead.
(1)	Vis	itatio	n for
	Che	ck o	ne
	a.		Petitioner
	b.		Respondent
(2)			n permission
(-,			b, or c.
			Visitation should not be allowed because:
	٠.		The state of the s
	b.	П	Visitation should be supervised because:
			Tibliadis i circula de cape, vicea desause.
			The supervisor for visitation should be
			Supervisor's full name: first, middle last
	C.		Regular unsupervised visitation schedule as the parents agree:
			ck all that apply
		i.	Reasonable visitation as the parents agree.
		ii.	Mid-week visitation on these days:
			M Tu W Th F
			☐ ☐ ☐ From a.m. to p.m.
		iii.	☐ Every weekend ☐ a.m. ☐ a.m
			From $_$ at $_$ p.m. to $_$ at $_$ p.m $_$ Day of week $_$ Time $_$ Day of week $_$ Time
			Day of week Time Day of week Time
		İV.	☐ Every other weekend ☐ a.m. ☐ a.m.
			Fromatp.m. toatp.m **Day of week Time Day of week Time**
		٧.	Other Describe
		vi.	Visitation will start on
		¥ 1.	Month Day Year

E. Joint physical care plan

 $\textit{Use} \to \textit{only if both Petitioner and Respondent will have joint physical care.}$

If one parent will have physical care with the other having visitation, then skip this section and complete section D instead

(1)	How Petitioner and Respondent will make decisions about the children: For example, decisions on school, medical care, religion, and other decisions parents make for their children.
(2)	How the children's time will be divided between Petitioner and Respondent: Also use section F for holidays, school breaks, birthdays, and other issues.
(3)	How the children's expenses will be paid: For example, expenses such as clothes, activities, and school fees.
(4)	How Petitioner and Respondent will deal with major changes or disagreements about the children (including changes due to the children's age and development):
(5)	Other issues:

F. Other Custody and Visitation Considerations

All parents should complete section F regardless of physical care plan.

(1) Detailed holiday schedule

This schedule tells on which holidays the children will be with either Petitioner or Respondent.

You do not have to fill in everything. Any day that is left blank means the children will spend that day with the parent who already has the children on that day.

P = Petitioner R = Respondent

			Г.	= Penn	oner	Κ-	Respon	иет
Holiday	Tim	е	Every P	year R	Even P	years R	Odd : P	years R
New Year's Eve	:	□a.m. □p.m.						
New Year's Day	:	□a.m. □p.m.						
Martin Luther King, Jr. Day	:	│						
President's Day	:	│						
Memorial Day	•	│						
Independence Day July 4th	:	□a.m. □p.m.						
Labor Day	:	□a.m. □p.m.						
Veterans' Day November 11th	:	│						
Thanksgiving Day	:	│						
Christmas Eve	:	│						
Christmas Day	:	□a.m. □p.m.						
Mother's Day	:	│						
Father's Day		│						
Petitioner's Birthday	:	□a.m. □p.m.						
Respondent's Birthday	:	□a.m. □p.m.						
Halloween October 31st	:	□a.m. □p.m.						
Other: Describe	:	□a.m. □p.m.						
Other: Describe	:	□a.m. □p.m.						

(2)	Sp	eciai	rules for holidays Check one
	a.		If a holiday falls on a Friday or a Monday, the parent with the holiday will have the whole weekend.
	b.		If a holiday falls on a Monday or a Friday, the alternating weekend schedule in 2.D(2)c.iv. will continue. This means the parent who has the children on the holiday weekend may have the children two weekends in a row.
	C.		Other Explain
(3)	Su	mme	er Check one
	a.		Summer school vacation will be divided as Petitioner and Respondent agree.
	b.		Petitioner and Respondent will each have one-half of the summer school vacation with alternate weekends to the other parent. The children will be returned to the parent with physical care at least one week before school starts.
	C.		The parent without physical care will have two weeks of uninterrupted summer visitation with the children and the parent with physical care will have two weeks of uninterrupted summer visitation with the children. During the rest of the summer the weekly visitation schedule should be followed.
	d.		Other Explain
(4)	Wi	nter	school holiday Check one
()	a.		Winter school holidays will be divided as Petitioner and Respondent agree.
	b.		Petitioner and Respondent will each have one-half of the winter school holiday and
			alternate the first and second half each year.
	C.		alternate the first and second half each year. Other Explain
	C.		·
	C.		·
	C.		·
(5)			Other Explain school break Check one
(5)			Other Explain
(5)	Sp		Other Explain school break Check one
(5)	Sp a.		Other Explain school break Check one Spring school break will be divided as Petitioner and Respondent agree. Spring school break will be alternated every other year between Petitioner and
(5)	Sp a. b.		Other Explain school break Check one Spring school break will be divided as Petitioner and Respondent agree. Spring school break will be alternated every other year between Petitioner and Respondent.
(5)	Sp a. b.	ring:	Other Explain school break Check one Spring school break will be divided as Petitioner and Respondent agree. Spring school break will be alternated every other year between Petitioner and Respondent. Petitioner and Respondent will each have one-half of each spring school break.
(5)	Sp a. b.	ring:	Other Explain school break Check one Spring school break will be divided as Petitioner and Respondent agree. Spring school break will be alternated every other year between Petitioner and Respondent. Petitioner and Respondent will each have one-half of each spring school break.

(6)	The	e chi	Idren's birthdays Check all that apply
	a.		Petitioner and Respondent will have contact with the children on their birthdays as the parents may agree.
	b.		A child's birthday will be spent with the parent who has the child on that day.
	C.		Each child's birthday will be alternated from year to year between Petitioner and Respondent.
	d.		Petitioner and Respondent will each have no less than two hours of personal contact with the child on the child's birthday.
	e.		Other Explain
(7)	Pi	ck u	p and drop off Check all that apply
	a.		The parents will agree about pick up and drop off for each visit.
	b.		The parent with visitation will pick up the children at the other parent's residence at the beginning of visitation and the parent with physical care will pick up the children at the end of visitation.
	C.		Only certain people can help the parents with transportation. If persons other than Petitioner and Respondent will help them provide transportation of the children, only the following people are permitted to help:
	d.		Other arrangements for visitation (for example, Petitioner and Respondent will meet at a location between their residences): <i>Explain</i>
(8)	The		rent without the children may contact the children by Check all that apply Calling the children
			eck one
		i.	☐ At reasonable hours
		ii.	□ a.m. □ a.m. □ a.m. □ p.m. to □ p.m.
			Phone no. where children can be contacted
	b.	П	Emailing the children at this address:
		_	Email where children can be contacted
	C.		Other Explain

(9)		_	es to the schedule Il that apply			
	a.		The parties may agree to additional visitation of	or changes to the sche	dule.	
	b.		If one parent fails to arrive at the appointed tin	ne, then the other parer	nt will w	vait for at least
			minutes before cancelling the vis	it.		
	C.		No changes allowed except by a court order.			
	d.		Other Explain			
(10)		solvi eck o	ing disagreements			
	Bef	fore	going to court to resolve disagreements, Peti	tioner and Responder	nt will	
	a.		Ask the following person to help them resolve	disagreements:		
					()
			Name	Relationship to parties	Phon	e number
			Present street address	City .	State	ZIP code
	b.		Go to mediation. Do not check if mediation will or an injunction.	ll not work because of do	mestic	violence

Attorney Help

Rule 17.400—Form 430: Proposed Parenting Plan, continued

A. An attorney did not help me prepare or fill in this paper. B. An attorney helped me prepare or fill in this paper. If you check B, you must fill in the following information: Name of attorney or organization, if any Attorney's PIN — Ask the Attorney's PIN — Ask the Attorney's phone no. Attorney's fax no.—optional 4. Certification of Service by Mailing or Delivery Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. I
If you check B, you must fill in the following information: Name of attorney or organization, if any
Name of attorney or organization, if any Business address of attorney or organization City State Attorney's PIN – Ask the Attorney is PIN – Ask the Attorney's phone no. Attorney's fax no. – optional Attorney's email address – optional Certification of Service by Mailing or Delivery Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. I
Business address of attorney or organization City State Zi Attorney's phone no. Attorney's fax no optional Attorney's email address - optional Certification of Service by Mailing or Delivery Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. I,
Business address of attorney or organization City State Zi Attorney's phone no. Attorney's fax no. – optional Attorney's email address – optional Certification of Service by Mailing or Delivery Section 4 to be completed only if filing in paper or if the other party is exempt from electronic filing. This document, if filed electronically, will automatically be served on registered parties. I,
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I mailed or gave a copy of this Motion to the other party or the other party's attorney a address: Name of person to whom I delivered or mailed it Party's or attorney's mailing address City State ZIII Oath and Signature
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Name of person to whom I delivered or mailed it Party's or attorney's mailing address City State ZII Oath and Signature
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I,, certify under penalty of perjury and pursuar
Print your name
to the laws of the State of Iowa that I have read this Motion and that the information I provided in this Motion is true and correct. I ask the court to grant this Motion.
Signed on:
Month Day Year Your signature*
Mailing address City State ZIP code
Dhous much on Email address Additional amail address it
Phone number Email address Additional email address - if ave
* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing electronically, scan the form after signing it and then file electronically.
* Whether filing electronically or in paper, you must handwrite your signature on this form. If you are filing
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Forms 431 to 500: Reserved

Rules 17.401 to 17.499 Reserved.